# DEVELOPMENTAL SERVICES QUALITY COUNCIL January 14, 2014

Attending Members: Cathy Spinney, Area Agency Board–Region X; Brian Young, Private Provider Network; Robin Carlson, Enhanced Family Care Provider; Dick Cohen, Disabilities Rights Center; Sarah Aiken, Community Support Network, Inc.; Bill Cohen,; Jennifer Pineo, Area Agency Board–Region I; Dave Ouellette, NH Council on Developmental Disabilities; Jonathan Drake, Institute on Disability; Karen Kimball, Bureau of Developmental Services; John Richards, Brain Injury Association of NH; and by phone Debra McClure, Family Support Council and Barbara Wilson, Direct Support Professional

Other Attendees: Ken Lindberg, Bureau of Developmental Services; Brian Huckins, Autism Council

Absent Member: Chrystal Johnson, People First of NH; Peter Fleming, Able NH; Kirsten Murphy, Area Agency Board–Region II; Laurie Giguere, Family Support Council

Facilitator: Cathy Spinney

The January agenda included: 1) Follow-ups from October Retreat: approval of October minutes; Updates on State Budget/Managed Care, the Annual Report, Action Item Review and He-M 503; 2) He- M 521 Certification of Residential Services or Combined Residential and Day Services Provided in the family Home – fire safety recommendations; 3) He-M 530 Supported Independent Living; 4) Legislation to study the use and impact of sub-minimum wage being proposed; 5) Quality Council Meeting Schedule & Sub-Committee Meetings; 6) Go To Meeting Training

The minutes of the October retreat were reviewed. Deb McClure motioned to approve which was seconded by Brian Young. The Council voted to approve, Bill Cohen abstained.

#### **Updates**:

## **State Budget/Managed Care**

Cathy reports that at least four people have contacted her who have had issues with Step 1 of Managed Care. One parent/guardian reports having lost choice as their provider only signed with one MCO. Cathy says she has heard a lot of providers are doing that to "try it out." The parent also did not get their packet of information. Additionally, she called the MCO to inquire about her son's medications and the MCO would not talk to her as they had no proof of her guardianship. Evidently, DHHS has been "piece meal" sending this information to MCO's. She felt like the MCO was unresponsive to her situation. The Commissioner is aware of it now. Cathy says guardians should call their MCO to make sure this information has already been provided. John Richards says he was on the phone for 8 hours last week trying to get his pharmacy switched. He had to call the state office to get it fixed. Cathy asks that members document these situations so they can be shared with the Governor's Council on Managed Care. Dick Cohen also asks that the

DRC is informed of unresolved situations. From Denise: Please make sure people know to call the Medicaid Client Services Call Center if they encounter any issues with their MCO. The numbers are: 271-4333 or 1-800-852-3345, Extension 4344.

## He M 521 changes

Matthew Ertas (now retired as Director of BDS) called in to answer questions about proposed changes to He-M 521.05 Administrative Requirements, section (a), (2)(e)(f) and (g). BDS had solicited feedback, including from CSNI. As a result, the rule is being revised to include provisions that make reference to integrated smoke detectors. This proposal came from work at the regional forums that were held for families and stakeholders. It was clear that families understood the need for integrated smoke detectors, but were not open to mandated fire drills or intrusive strategies. The consensus from all the forums and e-mails was that integrated smoke detectors were okay as long as the state would pay. The regulation changes reflect this. CSNI found the changes too restrictive and didn't to encounter situations where services to a family were denied if the family didn't want smoke detectors. Matthew said that BDS is asking the Quality Council to consider the proposed revisions which have incorporated the recommendations made by the Council. The Council must consider whether it wants to reopen the discussion on whether or not interconnected smoke detectors should be required.

No one from CSNI (other than Sarah Aiken) was in attendance to present their views. Sarah indicated CSNI thought there were not enough families polled. The families they spoke to (she said there were very few at forums) said it wasn't made clear that they would be without services if they did not have the integrated smoke detectors. Sarah also indicated she was not at the forums, but this was discussed.

Matthew: if you want certified services, you have to do this. It's a reasonable accommodation. It's the same payment arrangement as He-M 1001 where the state will cover the cost for fire safety.

Dick Cohen: chaired white paper subcommittee and went to the CSNI board and got input before the forums (three forums held around the state). We sent notices indicating why the forums were happening. We asked people to weigh in on whether this should be a requirement. Overall, we had very good discussions. Dick agrees with Matthew that the DRC recommendations strike a balance of what they heard at the forums from families and service coordinators. In addition, anyone can give feedback at the JLCR level when it comes up.

Bill Cohen: Families still have to maintain the smoke detector system even though state pays for it. But loss of services seems a rather Draconian position. "If deemed necessary" they could lose their services. Open ended, open to interpretation.

Dave Ouellette commented that this was already hashed out in QC meetings. Group homes, staffed, EFC homes already have to do this across the state. Maintaining is changing batteries or having repairs.

Brian Huckins mentioned it also means replacing the detectors every ten years.

Dave O. It's an important regulation for safety.

Jen Pineo – We need to make sure exact wording is in minutes. Doesn't remember "hard wired smoke detectors" in previous minutes. Additionally, there are also Bluetooth capable detectors. Are we also requiring CO detectors, not just smoke? Old houses will be costly. Responsibility of family or homeowner? Who is responsible if it's a rental? Hard wired CO? Will plug-in work? What else will they require eventually?

Sarah Aiken. CSNI voted unanimously (10 agencies) want to keep people safe, but don't want to put undue pressure on families. We should not legislate how families provide services in their own home.

Dick Cohen. There was a specific proposal voted on by the Quality Council. CSNI is only one stake holder. There are multiple stakeholders that we considered. Robin: The intent is to keep people safe.

Jonathan: There's also a lot on education in the rule. Also might use the wording "hardwired or better technology."

Sarah asked that if we're still so far apart on agreement, why we are rushing to come up with something. The rule expires in 2017...we have time to discuss.

Matthew commented that BDS wanted to bring it back to QC to see if they're interested in CSNI feedback and readdress their concerns.

Sarah: since we've waited a year and a half, and have three years before it's up, can we wait as long as we have a hard and fast deadline to move forward?

Matthew: overall impetus for decision came about due to concern from tragedy in Pittsfield. We want to make sure people are in safe places. It is a personal care service and nighttime is a personal care time – a significant time of concern for safety. We also could change language about technology, as it is older language.

Sarah: would hardwired smoke detectors have changed things in Pittsfield? Wasn't it an accessibility issue?

Matthew: I did not see the Fire Marshall's final report.

Dick C: not sure about Fire Marshall's report, but my understanding is the fire would probably have been noticed earlier. When DRC made the white paper recommendations, we were looking at recommendations to prevent death in the future. There should be

urgency on many of these recommendations especially when there are life safety concerns. We can affirm to re-affirm our vote, coupled with additional comments from whoever wants to comment at JLCR, or do nothing and let it stand.

Jonathan: can we have a small group to meet with CSNI and other concerned groups? Dick: we've done that. QC is only an advisory group. There's plenty of opportunity at JLCR.

Cathy: will discuss more but need to move onto 530 while Matthew on phone.

Matthew: before discussing 530, we brought this 521 issue back to QC as a courtesy. The Quality Council does not have to do anything more if they don't want to. The Bureau was going back to JLCR, but wanted to give the QC an opportunity to weigh in. If QC reversed it, the rule would go to JLCR and others could give testimony against it.

#### He-M 530 Supported Independent Living

Matthew: 530 is a regulation that should have been in place a long time ago. About 450 people now receive Independent Living Services. Live in their own places, typically, receive a few hours per week to help them continue living that way. There have been a couple of attempts before to draft this, but didn't result in any regulation. I made this attempt before I retired. The draft covers typical sections of our regulations: service principles, what's covered, expectations for training, quality reviews, etc. In the Quality section, we try to identify some people who are responsible for quality, such as program director, service coordinator. Any questions/comments? It is currently out for public comment, then to JLCR

This is your advance copy. A public hearing has not been held yet. Trying to get your feedback early.

Cathy: we'll put it on our next agenda for a more comprehensive discussion.

#### **Quality Council Meeting Schedule & Sub-Committee Meetings**

Cathy: The results of the online survey on meeting times:

**1. Monthly meetings vs. every other month.** It was an 8-6 vote to meet every other month, one abstained. We haven't thoroughly vetted every other month as last time we didn't have quorum. We will vet it thru annual meeting in September. Then discuss how it's going, if we're getting our work done, work flow, etc.

Dick C: agrees we should keep trying it. One point is he was assigned task to have sub-committee on White Paper recommendations. We've gotten to maybe one and a half recommendations. He would like to have reaffirmation on this work. And managed care, if it happens on DD side, there'll need to be strong standards and quality outcomes. Need to have some kind of Quality group in state government to monitor it.

Cathy: This would be domain of the sub-committee.

Jonathan: downside to every other month – if you miss meeting, you've missed 4 months.

Cathy: members need to consider making it a priority to make sure they make it (baring illness, emergencies). May have to give up seat if don't believe you can be consistent.

Brian H – is there a capacity to vote in between meetings?

Cathy: email but that's hard without discussions.

Brian – with managed care coming, there may be a lot of things to vote on quickly.

Dick C: since we're a public body, email voting isn't a good thing.

Cathy: we can call emergency meetings, though we haven't had to yet. We don't make policy, we only advise.

Jen P – someone needs to make sure they follow up on agenda, who's coming and making sure they're coming to present or sending someone, etc.

Cathy: consensus is to give every other month a shot thru out Sept annual meeting? All agree. So next meeting in MARCH.

**2.** Day of week – survey vote was 10-9 for Wednesdays. Thoughts on this?

Sarah – Tues are nearly impossible due to Tues being big hearing day at Legislature.

Jonathan – does a lot of training and conferences on Weds. Already booked out thru this year, though not every Wednesday.

Cathy: if moved to Weds, would have to replace you?

Jonathan: Yes. Depending on which Weds – trainings are usually every other Weds.

Barbara – works Weds, has Tues off.

Sarah – motion to change to Weds. Brian Young, 2<sup>nd</sup>

John R – Are Tuesday or Monday possible?

Cathy: feedback on those was low.

The Council voted 8 in favor of changing meetings to Wednesday. Three were opposed: (Dave Ouellette, Jonathan Drake, Deb McClure)

3. Which Wednesday of the month? Dick C motioned it be the third. Jonathan  $2^{nd}$ 

Discussion: Cathy asked Jonathan if he preferred the 3rd or 4th Wed? Jonathan: school vacations. Usually 4th. Dick stands by motion.

The council voted to have the meetings on the third Wednesday, 10 in favor, with Barbara abstaining.

**4. Preferred TIME for the meeting is the morning.** People seem to want not too early due to potential for bad roads, getting kids to school, etc.

Deb M suggests 10-12.

Cathy: said length of meeting will be critical is we're meeting every other month –is two hours realistic to get it all done? Subcommittee, ad hoc committee reports alone will take a lot of time. Might be reasonable to schedule two hours and see if we can get thru it and if we're able to be thorough and meaningful.

Jen: we need to stick to starting and ending on time. Not late. People need to make sure they plan to get here on time.

Barbara: people presenting need to limit their presentations

Deb: agrees we need to trial the two hours.

Karen K: what about going until 12:30?

Barbara: keep it at 2.5 hours and we can leave early if we finished.

Brian: His school committee schedules two hours but could motion for an extra hour.

Jen: front load the important stuff so people can leave if has to.

Motion to schedule for 10-12, but will entertain motions to go later if have to: Deb moved , Dave Ouellette  $2^{nd}$ 

Council voted to approve the motion: 12-0

Cathy: By this scheduling, then the next meeting is March 19<sup>th</sup>.

## Legislation to study the use and impact of sub-minimum wage being proposed

Bill Cohen needed to leave early and had a comment about the sub-min wage. He believes there might be a group of workers that could destroy concept of minimum wage. Or could be a trap to allow individuals not intended to go below minimum wage.

Cathy asked about HB 1174. Sarah says hearing not scheduled.

Action item: Cathy asks Sarah to notify council when hearing scheduled. The bill establishes a commission to look at this issue. CSNI is asking the representation to include someone from the AA's on the commission as that isn't in there yet. Brian asks that PPN be included too. Sarah will pass that along, too. QC believes there's enough overlap in membership that a QC member does not need to be on there.

#### **Other/Announcements**

Dave O: SRV training coming next week. SRV was required for all LSS staff upon closing of the school. There is one day and 4 day extended trainings. Dave recommends that members of the QC who haven't had this training do it at this point. Two other trainings coming up – one northern NH, one southern NH.

Cathy: part of going to every other month involves individual commitment to sub committees:

DSP workforce - Dick (point person)

Transparency - David

MGD care - Sarah

Domains - Cathy will take it for now but need someone ongoing

Various rules

People need to make sure they're signed up. Point person arranges for the meetings and is responsible for them working. Subcommittee reports will be standing agenda item. Point person or designee will be expected to be prepared.

Dick: Workforce Subcommittee has two primary recommendations. 1) Upgrading wages and 2) training certification development package. Work now is to monitor that progress. Maybe substitute White paper committee as a standing committee (and have it monitor the workforce).

Cathy: leave name as is but let committee decide how to proceed. Dick thinks it's more appropriate to be called by White paper since Department has asked that they keep tabs.

To present an option for "remote meeting," Ken Lindberg from BDS did presentation of GoTo Meeting.

Meeting Adjourned at 1:32

Next Meeting is Wednesday, March 19<sup>th</sup> 10am – 12:30pm NH Council on Developmental Disabilities 21 S. Fruit St, Concord

# **DEVELOPMENTAL SERVICES QUALITY COUNCIL**

#### March, 2014

Attending Members: Susan Cambria, Community Support Network, Inc.; Robin Carlson, Enhanced Family Care Provider; Bill Cohen, Area Agency Board – Region IV; Dick Cohen, Disabilities Rights Center; Jonathon Drake, Institute on Disability; Maureen Fitzhenry, Family Support Council; Laurie Giguere, Family Support Council; Debra McClure, Family Support Council; Dave Ouellette, NH Council on Developmental Disabilities; Jennifer Pineo, Area Agency Board–Region I; Lorene Reagan, Bureau of Developmental Services; John Richards, Brain Injury Association of NH; Cathy Spinney, Area Agency Board–Region X; Barbara Wilson, Direct Support Professional; and Brian Young, Private Provider Network;

Other Attendees: Karen Kimball, Bureau of Developmental Services; Denise Sleeper, Bureau of Developmental Services; and Ellen Edgerly, Brain Injury Association; Brian Huckins, Autism Council; Chris Rueggerburg, Policy Director, NH Council on Developmental Disabilities

Absent Member: Chrystal Johnson, People First of NH; Peter Fleming, Able NH;

Facilitator: Cathy Spinney

**The March agenda included**: 1) Approval of January minutes; 2) Updates on State Budget/Managed Care; 3) He- M 521– fire safety recommendations; 4) Legislation being watched; 5) BDS Request for Quality Council Assistance; 6) He-M 503 Final Recommendations & Council Vote; 7) Legislation to study the use and impact of sub-minimum wage being proposed; and 8) Updates from Sub-committees.

## **Updates: State Budget/Managed Care – Lorene Reagan, BDS Administrator**

Family Support Funds have been restored to agencies. Family Support Councils are making decisions about how funding will be utilized.

Lorene shared the DHHS plan for Step 2 Development. One of the priorities for BDS is to look at what the system will look like. Looking at how this work will be structured in the Bureau with current staffing resources. The Bureau and stakeholders will be developing a plan that will serve as recommendations to the Department. The Bureau is here today to reach out to the Council, in its role, to ask you to partner with the Bureau in the development of the recommendations to provide to the Department.

While families approached Area Agencies to file a lawsuit to carve out DD services....participating in this plan development is not asking you to abandon this effort, but recognize that we would like stakeholder involvement as we develop the Bureaus plan. We envision robust involvement of the QC as part of the process. 12/14 is still the timeline.

Cathy Spinney clarified that the legal action is about recognizing that we were never carved in.

Cathy shared that the Council has been working hard to have a loud and clear voice about what the future of the system will look like. Work on this does not mean that we are agreeing that this is what we agree is right and appropriate, but looking at this effort as the back-up plan. This body is an important stakeholder group that should be a part of having a direct say in what the design might look like. The Council does have an existing Managed Care (MC) work group. Karen Kimball was asked to serve on the MC sub-committee. Cathy is asking for a vote of the Council to support using the QC in this role. Cathy has also reminded folks that all sub-committees are open to all members. She further asked that Sub-committee chairs include all QC members in their notification of meeting dates/times.

Clarification was sought on whether this was in addition to public hearings and focus groups.

Lorene clarified the departments approach and recognizes the importance of having stakeholder involvement while also doing this effectively given the time lines. As BDS develops a work product, we would like to bring it forward to the QC and all of their stakeholders. Each member represents a constituency group. Our expectation is for each member to share this with your groups. The Commissioner has said that the QC is a critical group, for creating broad outreach and perspectives. The statewide Family Support Council and self-advocacy will get additional considerations.

How will information be transparent too all members?

Maureen said she spoke with Brian Collins, Executive Director of Community Partners, who would be interested in hosting forums regionally. BDS will do our best to have someone from the Bureau to be present, but cannot guarantee that we can have staff present. This is why we are looking to the QC to be the central group and bring back info to the QC.

Brian Young mentioned it is a sensitive issue in providing feedback as they rely on referrals from the area agency.

Lorene thought this might be a good opportunity for Brian and Susan Cambria to come together and discuss this issue and also address those who are not represented in the PPN (Private Provider Network).

Jen Pineo asked if this was also going to FSC? There are concerns about getting information out as a volunteer and how it will get to others.

Lorene shared that one reason for carving out special attention is the important role families' play. The Bureau will be offering support to the members of the FSC and Jan Skoby will work with the self-advocates---who deserve special consideration of additional support. The feedback from all of these groups will go to the Managed Care sub-group.

Overview from Lorene - the Bureau is responsible for developing recommendations for Step 2 for the 4 waivers. We currently only manage 3 waivers, but for the perspective of developing a universal design for Step 2, we have included the CFI waiver. Karen Kimball is responsible for managing the waiver track for the DD and ABD waivers. Susan Lombard is responsible for the CFI waiver.

Karen Kimball shared that the management team is looking at lining up the various services between all 4 waivers. DD and ABD waiver are similar. Under former CMS rules, we were unable to combine target populations. Now this has changed and it may be possible to combine our approach. We are looking at all possibilities and exploring how to move forward to combine all 4 waivers under a possible 1115 single waiver. The mechanics and timeline are very constraining. We are looking at all services available, definition of services...some are statutory and others are service categories we create. Looking for parallels between all the services...look at demographics. Next task is to go to SIM to pull forward the work that was created under SIM. People have to be actively engaged.

Other things we will be looking at: how eligibility is determined, how might it change or stay the same; payment methodology, measuring quality, case management; these are some of the areas we are beginning to brainstorm around.

Cathy Spinney shared that SIM has done all this work. The Governor's Commission has done all this work. Now the Bureau is doing all this work. There is great concern about the duplicity of effort of volunteers' time and effort creating recommendations. It is reasonable to expect the sub-committee to work on this issue if it hasn't been worked on yet. How do we know if this isn't done? With mom hat on...I don't want to feel rushed in this process. The Governor is on record saying we will take our time to think this through. I don't want to see us get all geared up to get this done without ample time to digest and integrate into a thoughtful plan. We are looking for assurances that our time will not be wasted and will be valued.

Lorene shared that the Commissioner is very cognizant about concerns around the timeline. It has been publicly discussed at the Commission in early April. That is an excellent place for the discussion. What we can commit to—we will provide manageable pieces of information with reasonable time frames for input. It needs to be in layman's terms. Karen anticipates there will be forums in the future after we have a tangible product.

Cathy Spinney reminded everyone that DHHS ultimately makes decision about the contract. CMS is the payer and have to be cognizant of what they expect. The other thing to raise is that the Bureau is responsible for other Step 2 activities—state plan activities that address services relevant to autism supports and services. Also need to look at ESS into a Managed Care model. EI is funded 60% Medicaid and the remaining from General Funds. It is a complex system which has tremendous federal regulations. The Bureau will be looking to the Inter-agency Coordinating Council for input as well in that process.

Ellen shared the Independent Living Committee on Autism Spectrum disorders- topics that come up lately is the inconsistency in the interpretation in 525 arrangements and hopes that Step 2 will help in developing standardization. There is very contradictory information from different sources.

Lorene talked about the SIS (Supports Intensity Scale) with Susan Cambria. Susan is looking at SIS to make sure the evaluators have inter-rater reliability to ensure validity of results. Does it make sense to have SIS scores used in determining funding. CDS is going to be a big push in the area agencies...making sure it is being talked about early on, educating families, students...to set it up as early as possible to increase the number of families who choose CDS.

Lorene...building on the same discussion, we need to do a significant amount of research in different areas. We need help in researching the states who have managed care long term support services. A link sent to Susan Cambria which breaks down which state already has managed care in some form. There are a number of states who have some form of MC. Cathy Spinney made the recommendation for each area agency to take on one topic area. Ex: Quality Measures- if they are moving into a LTSS what were the quality measures they thought were important to include in the contract. Another discrete area of research, what exists in those contracts? What are the things we should include in NH contracts? What was included in contracts that didn't get the results intended? What waiver authority was used and why? Lorene will follow-up with Cathy and Susan on specific areas. Want to focus on areas that will help yield the results intended. Conflict free case management is another area.

PPN has a sub-committee on conflict free case management. Will have a forum in the next 6-12 months. They are doing research nationwide. Makes sense to have PPN keep that effort. Once Lorene comes up with list of topic areas, we asked that you let us know if you or someone is already working on these areas.

Lorene's e-mail is Lorene.Reagan@dhhs.state.nh.us

Old e-mail address is not a working e-mail.

The Bureau does not have a complaint report to share at this time. BDS hired a new attorney and we expect the report to be ready to share at the May meeting.

Ellen Edgerly how do we ensure that everyone is heard? Lorene spoke about what the Bureau will do. The Department will take on a broader stakeholder input process. The Commissioner will conduct broader efforts to capture input.

Lorene also shared that Denise Sleeper will be the active member on the Quality Council for DHHS. Lorene will participate as time permits. Karen will serve on the Managed Care Sub-Committee. BDS will assign another staff person to coordinate the minutes and agenda.

# **Approval of January Minutes:**

Jen Pineo motioned to accept January minutes: Deb seconded; Bill Cohen; Susan Cambria abstained. Motion unanimously passed.

# Legislation being watched - Susan Cambria

Currently watching 4 bills:

Medicaid expansion. If it passes, it will be a delay in the timeline. The executive session at House Finance Committee—seems likely to pass. They voted 15-10 to move along to the House...without any amendments.

SB414- Medicaid funding for children with IEPs and have speech therapy in school and outside school. Concern it was duplicative, the finding it is not. Passed on voice vote and clarifies rules that DHHS adopted. If you receive a Medicaid service while in school, it does not conflict with medically necessary services outside of school. Families may fear providing Medicaid information to schools for fear they will be denied the service outside of school. Cathy Spinney expressed that it would be helpful for FSC to receive this information.

SB396- Child Restraint Bill. Vote on 3/27.

HB 1174 Sub-minimum wage bill. The DD Council has taken the lead with other stakeholders to initially study this issue. It passed the house as a study committee, waiting a hearing date possibly  $3/25^{th}$ . No one is paying sub-minimum wages. Three businesses are certificate holders, but have no one using them. Moving on to next step. Senator Andrew Hosmer introduced an amendment to just phase out payment of sub-minimum wages. One year after the last 14c waiver expires. This gives one year for agencies to have transition planning to amply work with individuals, families and businesses.

Legislation and Quality issues- There are some problem areas with the initial implementation of Step 1 involving transportation. It involves issues with contracts and transportation companies with Managed Care. Lisa Brit Solsky at MCAC was reported to say that DHHS cannot get involved with private contracts. Cathy Spinney is concerned that this is a red flag. What will this mean in other service areas?

Can this be folded into comments and feedback into step 2 development?

Not all providers are contracting with transportation services. Karen Kimball explained that there needs to be a reason as they are required to provide this service. The reimbursement rate is not something the dept. can address

DRC came out with an extensive commentary on how to grieve an issue on their website (DRC website) If you are a Medicaid eligible individual, you are entitled to transportation to/from medical appointments.

Each Sub-committee will have a folder on E-studio.

**Managed Care Sub-Committee**, Susan Cambria, Chair... will meet directly after today's meeting.

## Domain Sub-Committees- Jonathon Drake, Chair

The committee agreed to define the purpose of the sub-committee and create a tool for making decisions. Prioritized report to QC on indicators for Community Integration, Safety, and Self-determination Next steps- review and decide what framework to work on. Next meeting is Tuesday April 1 4pm – 6pm.

**Transparency Sub-committee** – Dave Ouellette, Chair. The committee has not met yet. Ellen Boudreau thought this committee could assist in the work of what the Bureau has asked the MC committee.

**Work force Training Committee**- Dick Cohen, Chair. The committee has not met yet. Dick met with direct support coalition. Laura Harding, legislature, Steven Martel also interested in this. Has not kept the sub-committee informed of steps—will create a folder on E-studio.

Dick Cohen joined call at 11:30am.

Cathy Spinney asked the council to vote on desire to partner with the Bureau on Step 2 Development.

**Motion:** Susan Cambria moved to accept we work with Bureau on designing step 2; Debra McClure seconded. Lorene Reagan abstained. Unanimously approved.

He-M 521 – move forward to JLCAR

He-M 503 – Dick Cohen framed discussion and explained the documents. The sub-committee focused on areas that CSNI had concerns. The blue language is the areas of change.

Dick felt the process went well. Upon greater conversation, we better understood each other. In other areas there were compromises were made. All felt good about the changes. Dave Ouellette felt it was a healthy process and felt the recommendations were an improvement. All agree it contributed to a better final product. Do people feel ready to vote? Bill Cohen asked how does the final product look and get submitted. Dick reminded the Quality Council members that these recommendations are only all advisory to BDS and DHHS.

Cathy Spinney is profoundly proud of the work of the sub-committee in getting the rule strengthened. The ultimate goal is providing whatever is necessary to live a life with dignity.

Motions made by Debra McClure to accept the recommendations as developed by the sub-committee and submit to the BDS; Barbara Wilson seconded with the QC unanimously approving. Denise will pass on to John Capuco.

## **ANNOUNCEMENTS:**

ABLE will have third annual fundraising on May 17th Holiday Inn Concord \$40/ticket

Leadership Gala will be held 4/4 – open to all at Grappone Conference Center.

Brian Young of the Nashua Center is holding a fund raiser on 3/28. Donald Duschanne honorary chair, Radisson Hotel, wine and food. 6pm - 10pm

Dave Ouellette- Plans and Dreams Transition Summit – Claremont Savings Bank. Free of charge, March 21st

October 10<sup>th</sup> and 11<sup>th</sup> – DSP Conference – Grappone Center, Concord

Governor's Commission on Disability – Disability Legislative leadership Training April 25<sup>th</sup> Legislative Panel- free of charge. 101 advocacy opportunity.

Wednesday November 12<sup>th</sup> – 8<sup>th</sup> Annual Caregiver Conference at Grappone Conference Center www.coalitionofcaring.com

Brian Huckins – May 17<sup>th</sup> Autism walk – Upreach in Gofftsown

May 8<sup>th</sup> – Crossroads Silent auction in Castleton, Windham,

NH Family Voices and PIC Conference 3/28 and 3/29

Member representatives update. Please let people know if you are unable to continuously participate to ensure a vote.

Dave Ouellette- People First becoming a solid group again.

Family Support Conference in May 3<sup>rd</sup> and 4<sup>th</sup> Grand Summit, Attitash

Robin Carlson and John Fenley will be the keynotes.

Motion made by Brian Young to adjourn; Debra McClure seconded, unanimously approved.

Next Meeting is Wednesday, May 21st 10am – 12:30pm NH Council on Developmental Disabilities 21 S. Fruit St, Concord

# **DEVELOPMENTAL SERVICES QUALITY COUNCIL**

May 21st, 2014 Minutes

## **Attending Members:**

Susan Cambria, Community Support Network, Inc.; Robin Carlson, Enhanced Family Care Provider; Bill Cohen, Area Agency Board – Region IV; Dick Cohen, Disabilities Rights Center; Maureen Fitzhenry, Family Support Council; Debra McClure, Family Support Council; John Richards, Brain Injury Association of NH; Cathy Spinney, Area Agency Board–Region X; Barbara Wilson, Direct Support Professional; Brian Young, Private Provider Network; and Denise Sleeper, Bureau of Developmental Services.

#### Other Attendees:

Denise Sleeper, Bureau of Developmental Services; Maureen DiTomaso, Bureau of Developmental Services; Chris Santianello, LRCS; Sarah Aiken CSNI; Jerry Donovan BIA: Chris Rueggerberg, NH Council on Developmental Disabilities

#### Via Phone:

Laurie Giguere, Family Support Council; Jennifer Pineo, Area Agency Board-Region I;

#### Absent Member(s):

Jonathon Drake, Institute on Disability; Laurie Giguere, Family Support Council; Dave Ouellette, NH Council on Developmental Disabilities; People First representative.

#### Facilitator:

Cathy Spinney

**The May agenda included**: 1) Approval of March minutes; 2) Updates on State Budget/Managed Care; 3) Legislation being watched; 4) Waitlist; 5) Updates from Sub-Committees; 6) Update on legislation to study the use and impact of sub-minimum wage; 7) Other

#### **Minutes**

Brian Young motioned to approve March meeting minutes; Deb McClure seconded. Motion unanimously passed.

# Updates State Budget/Managed Care - Denise Sleeper, Administrator, BDS

Denise Sleeper shared that there are currently no details regarding the impact of the budget shortfalls to the Department. There is a freeze on state travel, hiring and purchases. The Bureau has maintained our level of staffing. Denise thanked all who contributed to the collection of information and resources on managed care. The Bureau is processing all the gathered information. Denise will post information from research to E-Studio. The Bureau's internal work group which includes staff from the Bureau of Elderly and Adult Services will utilize the information as it moves forward in its work. However, the first part of the workgroup's task is to do an analysis of all of the Medicaid Waivers (DD, ABD,

IHS and CFI) to make recommendations to the Department as it considers which waiver authority to utilize in transitioning Medicaid long term care services into care management.

Cathy Spinney asked if the Bureau will be considering the recommendations from the Quality Council's Managed Care Sub-Committee

Denise Sleeper replied yes and that Karen Kimball is actively involved in the Bureau's work group and the Quality Council's sub-committee. She is well positioned to integrate the work of both groups into the on-going discussions and work of both groups. As there is so much work that needs to be accomplished to prepare for Step 2, the Bureau cannot delay its work, but it most definitely will actively weave in stakeholder input and recommendations on an ongoing basis.

Cathy Spinney asked "Is the bureau coming up with timeframe?"

Denise Sleeper replied that the Bureau does not have a time frame as the decision regarding the Step 2 timeline are decisions made by the Governor and Commissioner. From the Bureau's perspective, regardless of the timeline, we need to make use of as much time as we can. We need to move forward with research to be able to come up with good recommendations to submit to the Department for consideration."

Cathy Spinney expressed that many members on the council and entities we represent have apprehension. We are concerned whether the work and effort we are doing is actually going to be used and incorporated or will it be used as an exercise to satisfy a federal need.

Denise Sleeper responded that you can expect the Bureau to continue to work with its stakeholders in the typical way we conduct business. As we develop drafts, we will then share with our partners. The Bureau will make recommendations to the Department and the Department will make the final decision. Many things need to be done and thought through to prepare for Step 2. We will take recommendations seriously. Also, all of the decisions the Department has made, including bringing Lorene back to the Department, shows the Department's commitment to the importance of doing the Step 2 transition well.

There was some concern shared with the limitation of providing input via survey monkey in a very prescribed format.

Denise Sleeper clarified the intent of the process. The staffing level at the Bureau is small. Our capacity is limited to do extensive research and analysis. We have asked for a summary of research as a means to assist us in this monumental task.

There was also a question raised about how to submit additional information. Denise Sleeper reminded members that the managed care subcommittee is where you should direct additional information and feedback.

#### **Legislation being watched – Sarah Aiken**

Sarah Aiken stated as most of you know the House & Senate are wrapping up their session. They are looking at Committee of Conference and will meet next week before final session. House Bill 1431 which would allow the Quality Council to change the Autism representation form Autism Society of NH (which is now defunct) to the Autism Council. Sarah provided some background on the legislative process. When a bill is put in as LSR, there is an effective date of 60 days from the date when it is passed. This is standard language, but it can be changed. In this case, it wasn't changed... so while the bill has passed the House and Senate, it will not take effect until after 60 days. We will try to have the Autism Council officially participate in the next meeting.

Sarah Aiken mentioned there was one bill that we've been working on regarding a requirement to conduct Board Training. This has come up for the last few years. The issue is the way the bill was written would not allow for enough time or information to have higher level of responsibility.

Sarah Aiken spoke about House Bill 555 which established that it is a crime to financially exploit an elder. But it is hard to prosecute. This shores up the ability for criminal prosecution. The details of what this bill includes will be cleared up when the rules are written.

## **Annual Report prepared – Cathy Spinney**

Susan Covert prepared the Annual Report. Please be sure to review it. It has been sent to the Governor, Commissioner and Legislators.

#### **Employment Data Report- Denise Sleeper- deferred until the July meeting**

# **Waitlist – Denise Sleeper**

Denise shared the wait list information as of March 31st. The chart shows the breakdown of the category of priorities. 2 graphs that show the DD/ABD wait list and where it has been historically, but numbers are climbing back up again.

Many of the Council Members expressed concern that the current law is not being met. There are currently 69 people who are on the waitlist.

Richard Cohen summarized the law: #1) if you've been a client of an area agency and you are exiting school – services must be in place at time of exit; #2) you can be on wait list for no more than 90 days; and #3) for amendments to service agreements, the funding for services must available within 90 days. Services can start after that, but the funding must be in place. This is a violation of the law.

Denise Sleeper shared that is not a new issue; there are overwriting components with the availability of funding. Matthew spoke about it in previous reports on the waitlist.

The Quality Council discussed what steps to take to express their concern on the waitlist. The Council explored their options including sending a letter directly to the Governor and Commissioner; sending a letter directly to the Joint fiscal Committee; or sending a letter to

Lorene Reagan, BDS Administrator.

Richard Cohen – There are principals and law which requires services to be provided. That's a requirement. Also a requirement of services based on needs. People are entitled to quality services and on time. To address wait list is another violation. We are a government of law. They passed the law, suspended it, it's no longer suspended. It is the will of the people. If we don't address it, then they will not feel pressure.

Denise Sleeper shared that the issue of the waitlist is very complex and asked the Quality Council to invite Lorene to the next meeting to become fully informed on the Waitlist before writing letters to the Governor, Commissioner and Joint Fiscal Committee. There are many issues at play including the readiness of families to accept services and area agencies capacity to address clients. The other piece to this is that our Bureau needs to meet with legislators and provides a list with specific names of who will need services several years before they come into service. It's constantly changing. It is based on estimations that the area agencies could identify at that time.

The consensus of the Council was to move forward with writing a letter especially as the state is transitioning to care management. It is important to for them to follow the rules of our state. This is a Legislature issue. There wasn't full funding which is where problem started. Back in 2011 there were only 7 people on wait list. There is the ability to do this. It's not impossible. You need enough money but it wasn't impossible.

**MOTION** Brian Young moved to send a letter. Cathy Spinney noted there was a motion on the table, but requested more discussion.

Bill Cohen – Letter needs to be simple

Denise Sleeper – drew attention to the handout. Please review the data on the bottom of the page which identifies half of the people on the waitlist who are currently receiving services and are requesting enhancements.

The Council further deliberated the details of the letter including whether to request a reply; who to send it to; who to include as a cc

The Council asked if funding was in place to support people in FY'15.

Denise Sleeper responded that the Bureau has not received any information yet from the Governor and Commissioner regarding FY' 15 funding. There is no information yet on impact of budget shortfalls.

MOTION: Brian Young introduced the motion to send a letter to the Joint Fiscal Committee; Richard Cohen seconded motion. Denise Sleeper and Robin Carlson abstained. Motion approved.

Cathy Spinney will prepare a letter send a draft to everyone.

# **Sub-Committee Meetings:**

# Managed Care – Susan Cambria

Susan Cambria stated there was a productive meeting last meeting. The sub-committee will be divided into 3 sub-groups. To work on all the topic areas.

#### **Domains** – *Jonathon Drake*

Domains, John is on leave. Domains scheduled to meet June 3<sup>rd</sup>. Need someone to coordinate meeting or should we defer?

William Cohen – defer

Richard Cohen – defer

Robin Carlson – defer

Spinney – will email council when we meet in August

# Transparency - Dave Ouellette

Transparency hasn't met, William Cohen chair now. Needs members.

#### **Workforce Training – Dick Cohen**

The Committee has not met yet.

Cathy Spinney reminded all committee chairs that each committee is open to all members and you can invite non Council Members to join in the work groups.

# **Complaint Investigation Report - Melissa Nemeth**

3 sets of documents handed out.

Melissa Nemeth explained service rights violations. Complaint may come in as abuse, but conclusion will be it was a violation. Quality & service come up most often. He-M 310.

The Council asked if Melissa was responsible for triaging the complaints?

Melissa Nemeth responded that they go to Jan Skoby first and she assigns them to an investigator.

A recommendation was made that it would be helpful if you break out abuse by category.

Melissa Nemeth was unsure if that could be done because of the way the database is structured, but will look into it for next meeting.

Additional questions were raised including: Information from BEAS who investigates DD abuse/neglect? BEAS substation rate is much lower. Question how many cases are you both investigating? Is this duplication? The finding that gets person on registry is when BEAS makes a determination. If BDS finds a bunch of folks, they do not get onto registry. How do you coordinate with them?

Melissa Nemeth –responded that this is an ongoing discussion. Many times investigators

go together. We don't report findings to one another. We've looked at definitions. They are similar, not sure of reasoning why findings are so different.

Concern was raised over employees that jump agencies. Majority of those agencies terminated an employee.

Melissa Nemeth agreed. Ry Perry & Melissa are both concerned and are trying to see what can be done to capture this.

A recommendation was made to consider one investigation instead of two and that BDS office findings should count for registry.

Melissa Nemeth shared that this is part of the discussions that are taking place.

Cathy Spinney – any trends on sub categories? There was interest in seeing comparisons in model. Melissa Nemeth will follow-up to see if that's something that can be done.

Melissa Nemeth – Area agencies pull reports and any that had recommendations provided, we went out with liaisons and did a check in, in order to get follow up information and back up documentation that the recommendations were completed. We will do this every 6 months. We got good feed back from area agencies. The definition of level of supervision was not clear.

Denise Sleeper – using this example, it became a global system improvement because the area agencies recognized this as a universal issue and worked together to create a standardized solution. It was a great example of regional improvements that turned into universal system improvements.

# Legislation to study the use and impact of sub-minimum wage being Proposed – BDS /NH Council on Developmental Disabilities

Chris Rueggerberg - Sub-minimum passed & will become sub committee. It'll be a pretty quick study over the summer. US Department of Labor interested. We will continue to keep you posted on the work of the study commission.

Cathy Spinney – great success. Tip of hat to individual's families who came out to the hearings to support that bill. Another example of how this works.

Richard Cohen – Regarding Seclusion and Restraints - law passed 3 years ago about restraints, what happened was the definition got lost along the way. This law closed the loopholes regarding restraints for a service provider providing services to client under 21. There was some proactive responsibility with Department of Education & DHHS.

Chris R. – seclusion was used as punishment, bill focused on that. HHS & Education never adopted rules for bill passed in 2011. This bill says they have to do that. Health and Human Services have new rules people should look at. Administrative rules for rights **Other/Announcements** 

Per Cathy Spinney - Susan Cambr1a has resigned. Chris Santianello will replace her as CSNI representative on the Quality Council group and Managed Care sub-committee. Stated Bill was on the Transparency Committee w/David Ouellette and David cannot be Chair. Bill was asked if he would like to be the Chair, and that they could get him members. Bill agreed to be Chair. Cathy Spinney will send out an email about the other committees which will include information regarding being on sub-committees. Cathy asked the Quality Council members to help Bill with the Transparency Committee.

Cathy Spinney – email ABLE NH has task force/sub committee about Managed care step 1 issues with denials. Well Sense has heard suggestions & removed prior authorization requirements on 500 outpatient codes. Cathy Spinney will forward information to council. Speaking up sometimes has the desired effect. The fact they changed policy.

Denise Sleeper shared that the 3 managed care agencies met with area agency key staff to open up dialogue on the acute care needs of individuals served by our system. This is an important step of building relationships. They are already part of managed care, but this was an opportunity to strengthen relationships and become familiar with the needs of the individuals served by developmental services.

Chris Santianello – it's a positive first step.

John Richard asks the members to please not forget to specifically include and mention the acquired brain injury population in all discussions regarding managed care and waiver populations.—Cathy Spinney – noted

Richard Cohen – put on agenda CMS issued new regulations on use of waiver funds on congregated facilities. If you are on CFI / DD waiver you can't use money on someone in the congregated facilities. If the person is isolated from the community, (example Lakeview, farmstead, those types of places), the State needs to develop plan over several years to have those folks relocated. Prohibit folks going into facility & plan to address those currently there.

Denise Sleeper – CMS has not clearly defined the impact for non-residential settings. Fall is a good time to discuss. The Department is already planning around it. NH will not have the same impact as many other states, but it will be impacted.

#### **Public Comment**

None

**MOTION:** Cathy Spinney motion to adjourn meeting; Debra McClure seconded; unanimously approved.

Next Meeting: Wednesday, July 16<sup>th</sup>, 10am – 12:00pm

The Developmental Services Quality Council provides leadership for consistent, systemic review and improvement of the developmental disability and acquired brain disorder services provided within New Hampshire's developmental services system.

# DEVELOPMENTAL SERVICES QUALITY COUNCIL MINUTES

Wednesday, July 16, 2014 NH Council on Developmental Disabilities 21 S. Fruit St, 2<sup>nd</sup> Floor Concord

## **ATTENDING MEMBERS:**

Robin Carlson, Enhanced Family Care Provider
Bill Cohen, Area Agency Board – Region IV
Dick Cohen, Disabilities Rights Center
Jonathon Drake, Institute on Disability
Chris Santianello, Community Support Network Inc.
Maureen Fitzhenry, Family Support Council
Amber Parshley, People First NH
John Richards, Brain Injury Association of NH
Cathy Spinney, Area Agency Board–Region X
Barbara Wilson, Direct Support Professional
David Ouellette, NH Council on Developmental Disabilities
Brian Young, Private Provider Network
Denise Sleeper, Bureau of Developmental Services

#### **OTHER ATTENDEES:**

Maureen DiTomaso, Bureau of Developmental Services Mickayla Aboujaoude, Community Crossroads Melissa Nemeth, Bureau of Developmental Services Lorene Reagan, Bureau of Developmental Services

#### VIA PHONE:

Laurie Giguere, Family Support Council

#### **ABSENT MEMBER(S):**

Kathy Bates, NH Council on Developmental Disabilities Jennifer Pineo, Area Agency Board – Region I Debra McClure, Family Support Council Peter Fleming, ABLE

#### **FACILITATOR:**

Cathy Spinney

## THE JULY AGENDA INCLUDED:

- Approval of March minutes
- Updates on State Budget/Managed Care
- Updates on NCI Data
- Updates on Employment data
- Expiring Terms
- Updates on Waitlist
- Updates from Sub-Committees
- Review of Goals from October 2013 Annual Meeting
- Other/Announcements

#### **MOTION:**

- Debra McClure motioned to approve the May meeting minutes.
- Brian Young seconded.
- Motion unanimously passed.

#### UPDATES STATE BUDGET/MANAGED CARE - DENISE SLEEPER, ADMINISTRATOR, BDS

Denise Sleeper – permission was given to move forward with 50% of the wait list funding. All agencies are working with the Bureau on who will be served. Invitations have been sent for the Quality Council Stakeholder forum. There will be a number of forums throughout the state. Please broadly share the invitation. There will be numerous ways in which to participate in the forums. In the fall, public forums will take place.

All forums are open to the public. Please share all invitations broadly.

★ Cathy Spinney stated that the forum will be considered an official Quality Council meeting. Purpose is for the public to see where the QC Managed Care Sub-committee is at to date. Council members can comment, but comprehensive discussions will be held later on.

A question was raised as to why there will be multiple forums? Lorene Reagan responded-that the plan for stakeholder input is a part of the 120 day stakeholder process. In addition to the forums hosted by the Quality Council, People First, the Brain Injury Association, and the Family Support Council, there will also be an additional three forums in Concord, NH which will be waiver specific scheduled around the end of August. Additional regional forums will be held in 4 different parts of the state, which the Area Agencies will host. When all said and done, there will be close to 20 forums available for people to attend in order to gain information and have the opportunity to ask questions and voice concerns.

A question was asked about whether the waivers administered by BDS and BEAS were being looked at together or separately. Lorene Reagan responded that BDS & BEAS are working together on forums and will attend each other's forums. However, stakeholders who represent adults with physical disabilities and the elderly felt as if their voices where not being heard because of the strong advocacy represented by the DD/ABD community. At the end of the forum process there will be one forum which will include all waivers and at that time mandatory enrollment will also be discussed.

The question was asked "Will BEAS be putting out a notice regarding the forum dates"? Lorene Reagan - The Department is working on getting the schedule available on the website. http://www.dhhs.nh.gov/ombp/caremgt/step2.htm

Will the forums satisfy CMS requirements? Lorene Reagan responded that they will be used to provide information to CMS, but public hearings are still required. Any processes around applications to amend waivers and/or rule changes would still require a public hearing.

Is anything being done by the Department to compel Managed Care companies to stop denying services available under RSA 171-A? The MCOs have to obey this law. Lorene Reagan - this has come up at commission meeting and has made this a priority. The Department is working on educating managed care agencies to understand the needs of people with long term care are different and need to be taken into consideration.

Council Members inquired about the status of the research review submitted to the Bureau. Lorene Reagan shared that it is the basis for making recommendations to see what this will look like in Step 2. The Department is not waiting until the end of the forums to understand the major issues. At same time we are having forums, we are using best practice research for developing the framework.

#### NCI DATA - DENISE SLEEPER, ADMINISTRATOR, BDS

Denise Sleeper gave a brief overview of the Nation Core Indicators (NCI) and reminded the Council that this was the specific recommendation made by the SB138 Quality Committee.

The 2012-2013 adult outcome survey is available, but it is very lengthy. It will take some time to review the data. Denise asked the Quality Council, to consider working with the CSNI quality assurance group to review the data and develop recommendations. QC unanimously answered yes to working collaboratively with the CSNI QA Committee with a December target date for presenting findings and recommendations to the Quality Council.

Brian Young asked if the Private Provider Network could have representation on the committee.

Christ Santianello stated she will follow-up with CSNI to facilitate this request.

Richard Cohen stated that the purpose of NCI data is to get a picture of how we are doing on a number of items. Getting analysis of the data is important. But also where there is weakness and needed improvement. Need correction plans. There should be both the presentation of the data and then corrective strategies. Suggest a two part presentation over two different meetings.

Denise Sleeper shared that this is the intent of the collaboration and added that the Area Agencies have been very insightful and proactive to point out areas which need improvement through other quality reviews including the most recent complaint investigation review process.

★ Cathy Spinney stated we will allow 45 minutes during the November QC meeting to allow CSNI to review data results. Then during the January QC meeting allow another presentation for recommendations to address areas of weakness.

Richard Cohen stated he'd rather see more action plans than recommendation plans.

#### EMPLOYMENT DATA REPORT- DENISE SLEEPER, ADMINISTRATOR, BDS

Denise Sleeper distributed a handout which showed a snapshot of the results of the Employment Summary from June 2014. She noted there was a jump in number served & employed since June 2012. 246 additional people have become employed. Impacts have been made. Employment data report will be coming out soon. The number of people employed continues to rise. Noted as the population ages, we are seeing people who are healthier and living longer. After age 65 clients are no longer eligible for the MEAD program which offers working adults with disabilities the ability to accumulate assets this might become more of an issue in the future and should remain on the quality Council's radar.

John Richards stated MCOs need to have the understanding that we want them to continue with this type of support for employment. Lorene Reagan - it is reasonable to expect to place a quality measure for employment in Step II. Do the MCO's already have parameters for employment? Denise responded that there is work to be done in this area in preparation for Step II. The Care Management and Employment Task Force created a document specifically on employment for the Department and possibly the MCO's. The document will be uploaded with the understanding that it is purely a draft and not in final copy.

#### EXPIRING TERMS - DENIS SLEEPER, ADMINISTRATOR, BDS

BDS will send notices to the Agency/Organizations which have terms expiring. Included will be recommendations for changes if applicable.

#### WAITLIST - LORENE REAGAN, BUREAU OF DEVELOPMENTAL SERVICES

Cathy Spinney reviewed the discussion QC had from the last meeting regarding the waitlist. That QC had considered sending a letter to the Department and Joint Fiscal Committee asking why there is still a waitlist. The Quality Council agreed to invite Lorene to share information directly about the Waitlist before moving forward. The QC wants to make certain that whatever action they take, they are taking it with the right and responsible entity.

Lorene Reagan discussed in detail the history & background of the Waitlist.

- When working on the budget, every two years the Department goes to the Legislature with a budget based
  on projections for funds needed and the number of people who will need to be served in the upcoming two
  years.
- When the Bureau approached the Legislature back in 2012, what was used was based on a projected needs list. At that time, there were 654 people in need of services.
- Request was made for 26 million dollars to serve the people on the list. This was based on the average of 40 thousand dollars per person.
- What was provided was 24 million dollars.
- The Department is on track in this two year cycle to serve those 654 people, although the Department did not receive the entire amount requested.
- A number of different things can happen within those 2 years. Some examples:
- After age 21 a client become eligible for day services, community support services, residential, employment services etc. During the two year timeframe, a number of people on the projected list may hit age 21.
- Client could have significant need for increase in services which was not realized at the time of the projection list. This would increase the estimated cost for that client.
- Client may have lived with family members and never had services, now due to changes in their living situations now need services.

- The budget request is based on an understanding of data at a point in time. Things change from time of the budget request. BDS will not only serve the 654 people on the projected list, but additional people using funds which become available through vacancies in services (a move, death etc.).
- Understand that moving forward if Department only relied on the wait list funding and if high cost needs are added on, the agencies would not be able to serve the number of people required.
- Department holds onto the money from vacancies and have Advanced Authorizations for emergencies. (Estimate 20-30)
- The Department is having discussions with the Area Agencies executive directors on how they are managing the wait list.
- Half the people on the wait list are already receiving services. They are on the waitlist for enhanced services. But yet it is viewed the same way on the waitlist. The Department is trying to find a way to distinguish between no services and waiting for enhanced services

Chris Santianello stated that there are a lot of systems and they don't all talk together. She had a client who was on the waitlist for a long time; he was receiving services but remained on the list. The list needs to be cleaned up. Each region handles the list differently. Some wait to add people, some add people right away even if services are not needed right away or families are not ready to receive services. Meetings will be held regarding the tracking so that the information will be more accurate.

- Area Agencies are responsible for updating the registry. It is a challenge and questions arise if the registration tool is working correctly.
- Can the regions look at the registry and update their information?
- Can there be place holders for those not ready to receive services, yet do not want to be removed completely from the waitlist.
- The Bureau and Area Agencies executive directors are looking at a database to see if improvements can be made.
- Discussions with agencies as to other services available.
- We need a concise approach throughout all agencies.

Cathy Spinney asked if the Department could analyze the data from the last 5 years. Why has that not already been done? Lorene Reagan - there are challenges with the budget; Legislature struggles to come up with funds. The Area Agencies can make request and try to leverage with vacancies. Please note that the Bureau is trying to find a balance with the request and needs, with significant shortfalls within the budget. It is a give and take process. There are other factors to consider. Other entities are approaching legislature as well. The Department does not want to be in a situation where cuts will need to be made in funding. So far the Bureau has been able to move forward without cuts in services. Other areas have had to have reductions.

Cathy Spinney stated that Lorene made valid points, but yet, our system relies on collaboration between Area Agencies, the Bureau and the families. Yet more and more work is being shifted onto the families. This was not supposed to be shifted onto the families. Individuals are losing skills and families are losing money when they cannot return to work. Other entities do not have the strong advocates like we do. We get results because we advocate so hard. The amount of care given and what the system (BDS) is asking for is a bargain because the families are willing to work for free. At the end of the day, shortages are shifted back to the families to figure out.

Lorene Reagan acknowledged that New Hampshire does rely on the care provided to the client's by their families. We understand and respect that. If a request for Advanced Authorization comes into the Bureau, when they are reviewed, if families cannot go to work they would be prioritized. There are different levels of waiting within the wait list. Priorities are appropriate. It is a balancing act between additional funds, changes, working with agencies, Area Agencies, waitlist approaches etc. Lorene recommended that discussions continue to better understand the wait list. The Bureau can offer assurance the numbers will go down.

Chris Santianello stated that collaborative partners are doing everything they can.

The lawmakers made this a law. It is very clear law. We need to hold the people who made that law accountable.

Chris Santianello stated that the QC needs to be careful of unintended consequences to families. There needs to be a balance in the system.

Brian Young asked if funds become available due to vacancies does that specific Area Agencies get first dibs before it goes in the pool. Lorene Reagan - no

Brian Young asked if they are looking at evolution of consumer directed services.

Cathy Spinney stated there is a level of sacrifice to the families. The Area Agencies are governed by us (users of system). No one in our system is getting rich. We are trying to make it work so that the person has a good life. But now, MCOs will be getting rich. Maybe families will now want to get paid. Bills should be sent to the MCO's. They are the ones making the profit now. Profit is not compatible with the spirit of collaboration.

Chris Santianello stated this needs to be on our "must haves" to the MCO's.

Brian Young mentioned a new initiative Gateways unveiled. It is beginning of addressing issues and building a bank of available people.

William Cohen asked about the model of \$40K per person. Has there been any tracking as people enter the waitlist as to how it measures?

Lorene Reagan responded that there is an analysis of waitlist dollars per person. Some agencies were below, some significantly higher per person. We are working with those agencies that have higher costs to speak to those agencies with a lower cost region; therefore more people would be able to be served.

Chris Santianello – it is hard to look year by year. My year could be much lower based on the number of clients. It ebbs and flows. Lorene Reagan – through these discussions, BDS is concerned. For FY15, BDS will be tracking requests and prioritization of the Waitlist, when funds became available, and when services began. The Bureau does have a plan for FY15.

Richard Cohen – My sense is that \$40K per year is based on the perception that families can shoulder what is not covered. It used to be 43 thousand per person but it has now dropped. Lorene Reagan – the average per person is still 43 thousand. It was determined 40 thousand for new people coming onto the waitlist.

Richard Cohen – People's needs have not decreased, but less money has been appropriated. Families are shouldering more. The law requires for kids to receive services upon graduation. Funds should be allocated 90 days prior to graduation. There should not be a wait at all. That sub-group should show if they are receiving services. Lorene Reagan - those are the people on the waiver. These are not waiting for family support or respite, they are currently in services.

Richard Cohen - can you get data to provide how many people are getting day services, but need enhancements?

Robin Carlson – most is going to direct support workers. Are they looking at turnover? I would like to see the breakout of where that 24 million goes. Day programs are very different than customized supports. Relationships are highly important. Educating workforce is another way to manage costs. Concerned that people are trapped in 24 hour supports they are not able to get out of. Agencies might need the funds, but not necessarily the person. Also they are not getting high quality services.

Amber Parshley – I personally have had lots of workers within the last year. There is a lot of turnover in my agency. I'm not sure who I'll have from one day to the next.

John Richards – to go back to Cathy's comments, I'm concerned if the net of 38 hundred people and if each of their families said I'm going to send a bill for \$10/hour for 10 hours a week to the MCO, it could implode the system. So I question if the Quality Council has a role in this? Should QC make a statement? What would happen if all families sent in bills?

Cathy Spinney – the MCO wouldn't pay. We are just trying to make a point.

John Richards – the whole system could break down. What can we do here?

Cathy Spinney – this is one of the many reasons the QC took the position of being opposed to for profit companies. When we are telling the Department what the system should have, it is important to understand the balance of the system depends on free care from the families. The advice to the MCOs is to stop saying no to things which the laws state they must provide. They need to just do it. Don't make families call. Just authorize the PAs. It should put them on notice to not make things harder when they take over day to day activities. I hope it serves as a notice to the MCOs. This needs to be in a recommendation with the full council voting.

John Richards – MCOs do not have the experience with this piece of it, they usually only deal with doctors.

Lorene Reagan – we report data on people and days waiting to an oversight committee. Anther report is coming up in August. I ask the QC, given what you've heard from us today, that you allow us to do that work before moving forward with a formal concern to the waitlist oversight committee. I just ask you to recognize we hear your concerns and it is being worked on. The problems are being addressed and they can be significantly improved upon. Please do what you feel is necessary. We would rather solve the problem, than have to respond to a high level of conflict.

John Richards - When will the Area Agencies be able to go through and clean up their lists to make your report clearer? Lorene Reagan – we have asked that the Area Agencies submit prioritizations within the next week. The Bureau's job will be to review the requests and review against the wait list, to address enhancements within the next month or two.

Chris Santianello – I agree. The September meeting would be a good time to review.

Cathy Spinney – we will review the snap shot of the waitlist at the September meeting and then we can see if we want to address it further or if we are happy with the report.

Brain Young – was there a motion last meeting?

Cathy Spinney – motion was to write letter

#### **MOTION:**

- Brian Young motioned to table the motion to write the letter.
- Maureen Fitzhenry seconded the motion
- QC Unanimously approved to table the writing of the letter pending more information.

Cathy Spinney – we want quality information at the September meeting.

## SUB-COMMITTEE REPORTS; MANAGED CARE - CHRIS SANTANELLO

- There is a meeting to be held right after this meeting.
- There are 3 sub-committees of the sub-committee working between meetings.
- Will discuss what to present in August.
- ★ Spinney when sub-committee has info please add it to studio.

## SUB-COMMITTEE REPORTS; DOMAINS - JONATHON DRAKE

- Meeting scheduled for Monday, August 4, 2014 from 4:00 6:00PM
- ★ Cathy Spinney please note all sub-committee meetings are open to everyone on Quality Council to attend

## SUB-COMMITTEE REPORTS; TRANSPARENCY - BILL COHEN

- Met last month
- 7 members
- Words heard differently. Different answer, different agencies different answers.
- Gave out assignments to everyone. Laurie is pulling together different mission statements
- Dave is looking at people to speak
- Bill pulling strategic plans for where difference lie
- Talked about having a brochure and possible speaking tour
- Next meeting scheduled August 8<sup>th</sup>

## SUB-COMMITTEE REPORTS; WHITE PAPER/ WORKFORCE TRAINING - DICK COHEN

- Meeting scheduled for August 6<sup>th</sup> at 10:00 11:30AM at the DRC
- Will be sending out an agenda.
- Plan to spend ½ hour going over 5 or 6 recommendations from the past and which have been implemented.
- Plan our game plan going forward
- Added a bunch of new members
- White paper came out late 2011. Tasked with improving services for those with more complicated behaviors. The Department asked the QC to come up with specific actions. Workforce committee merged. We need to look at recommendations made; where we are; and what is to be done

★ Cathy Spinney asked all sub-committee members to please post meeting dates and times, agenda & locations on studio.

## REVIEW GOALS FROM OCTOBER 2013 ANNUAL MEETING - CATHY SPINNEY

• Deferred to September meeting

#### **OTHER/ANNOUNCEMENTS**

• David Ouellette – Frank Simbatti is retiring Beth Dickson at IOD asked us to write letters to him. If people could think about it and write Frank a letter to discuss the years.

#### **PUBLIC COMMENT**

• None

#### **MOTION**

- Richard Cohen motioned to adjourn meeting
- John Richard seconded
- QC unanimously approved.

Next Meeting: Wednesday August 20th, 2014 from 10:00AM – 12:00PM Brown Building Auditorium The Developmental Services Quality Council provides leadership for consistent, systemic review and improvement of the developmental disability and acquired brain disorder services provided within New Hampshire's developmental services system.

# DEVELOPMENTAL SERVICES QUALITY COUNCIL MINUTES

Thursday, August 20, 2014 Medicaid Managed Care Quality Council Forum 129 Pleasant Street, Concord, NH

## **Attending Members:**

Laurie Giguere, Family Support Council

Bill Cohen, Area Agency Board - Region IV

Chris Santianello, Community Support Network Inc.

Jennifer Pineo, Area Agency Board - Region I

Cathy Spinney, Area Agency Board–Region X

Barbara Wilson, Direct Support Professional

Brian Young, Private Provider Network

Denise Sleeper, Bureau of Developmental Services

Brian Huckins, Autism Society of NH

#### *Absent Member(s)*:

Kathy Bates, NH Council on Developmental Disabilities

Carol Stamatakis, alternate, NH Council on Developmental Disabilities

Ellen Boudreau, alternate, NH Family Support Councils

Robin Carlson, Enhanced Family Care Provider

Dick Cohen, Disabilities Rights Center

Jonathon Drake, Institute on Disability

Maureen Fitzhenry, Family Support Council

Amber Parshley, People First NH

Debra McClure, Family Support Council

Peter Fleming, ABLE

John Richards, Brain Injury Association of NH

David Ouellette, NH Council on Developmental Disabilities

#### Other Attendees:

Maureen DiTomaso, Bureau of Developmental Services

Sarah Aiken, Community Support Network Inc.

Rebecca Whitley, Disability Rights Center

Michelle Rosado, Bureau of Developmental Services

Cathy Sloane, Well Sense

Terry O'Dean, NHF

Emily James, FS Council

Laura Jackson Gaudette, Bureau of Elderly and Adult Services

David Hackett, Gateways

Cindy Palfrey, Well Sense

Nancy Vaughan, American Heart Association

Jennifer Bertrand, Community Crossroads

Sydney Bertrand

Martha Jean Madison, NHFV

Beth Dixon, parent

Mickayla Aboujaoude, Community Crossroads

Jennifer Decker, Granite State Independent Living

Monica Ciolfi, Rep. Ann Kuster

Jude Schultz, Bureau of Developmental Services

Sara Blaine, AAIO

Caitlin Conley, Community Crossroads

Cynthia Mahar, Community Crossroads

Denise Powers, Community Crossroads

Amy Brandietrna, NHHF

Olga Clough, Cong. Shea-Porter

Todd Ringelstein, Bureau of Developmental Services

Margaret Moloney, Granite State Independent Living

Jon Eriquezzo, Crotched Mountain

Carolyn Vitiello, NH Health Families

Carolyn Stiles, Bureau of Developmental Services

Nancy Stiles, Senate

Linda Baker, parent

Ken Baker, parent

Teresa Moler, Candidate Hillsborough County Commissioner

Lorene Reagan, Bureau of Developmental Services

Ashlee Fye, Community Bridges

Jan Skoby, Bureau of Developmental Services

Karen Hatch, Community Crossroads

Kristi St. Laurent, Senate Candidate District 19

#### Facilitator:

Cathy Spinney

Welcome & Introductions

Managed Care Sub-Committee Presentation (Cathy Spinney and Chris Santianello)

Council Member feedback

Open to public comments

# **MOTION**

Chris Santianello suggested a motion to adjourn the meeting Denise Sleeper motioned to adjourn meeting Jennifer Pineo seconded the motion QC unanimously approved

Next Meeting: Wednesday, September 17, 2014 from 10:00AM – 12:00PM

The Developmental Services Quality Council provides leadership for consistent, systemic Review and improvement of the developmental disability and acquired brain disorder Services provided within New Hampshire's developmental services system.

# DEVELOPMENTAL SERVICES QUALITY COUNCIL (QC) MINUTES

Wednesday, September 17, 2014 NH Council on Developmental Disabilities 21 South Fruit Street, 2<sup>nd</sup> Floor, Concord

#### **ATTENDING MEMBERS:**

Cathy Spinney, Area Agency Board–Region X
Robin Carlson, Enhanced Family Care Provider
William Cohen, Area Agency Board – Region IV
Debra McClure, Family Support Council
Brian Huckins, Autism Society of NH
Maureen Fitzhenry, Family Support Council
Jennifer Pineo, Area Agency Board – Region I
Denise Colby, ABLE
Richard Cohen, Disabilities Rights Center
Chris Santaniello, Community Support Network Inc.
John Richards, Brain Injury Association of NH
Brian Young, Private Provider Network
Denise Sleeper, Bureau of Developmental Services

#### **OTHER ATTENDEES:**

Maureen DiTomaso, Bureau of Developmental Services Jennifer Vezina, Region 5 Lorene Reagan, Bureau of Developmental Services Sarah Aiken, Community Support Network Inc.

#### VIA PHONE:

Laurie Giguere, Family Support Council

#### **ABSENT MEMBER(S):**

Peter Fleming, ABLE
Amber Parshley, People First NH
Barbara Wilson, Direct Support Professional
David Ouellette, NH Council on Developmental Disabilities
Kathy Bates, NH Council on Developmental Disabilities

## **FACILITATOR:**

Cathy Spinney

#### THE SEPTEMBER AGENDA INCLUDED:

- Welcome & Introductions
- Review and approval of July & August minutes
- Updates on August 20, 2014 MMC Forum
- Update on NCI data
- Re-appointments and election of officers
- Sub-committee reports
- Review of goals from October 2013 annual meeting
- Others/Announcements/Public Comments

#### **WELCOME & INTRODUCTIONS**

- John Richards announced the Brain Injury Association's upcoming "Walk by the sea" event and passed out brochures, if you can't make it and want to contribute.
- John Richard announced that the Coalition of Caring Caregivers Conference is having annual conference on November 12, 2014 at the Courtyard Marriott, Grappone Conference Center in Concord, NH. You can find additional information on the conference at their website <a href="http://www.coalitionofcaring.org/">http://www.coalitionofcaring.org/</a> He encourages everyone to get word out to their constituents.

#### REVIEW/APPROVE JULY AND AUGUST MINUTES

- o Reviewed and made corrections to the July minutes.
- o MOTION to approve July minutes made by Brian Young
- o MOTION SECONDED by John Richards
- MOTION UNANIMOUSLY PASSED
- o Reviewed and made corrections to the August minutes
- o MOTION to approve August minutes made by Chris Santaniello
- o MOTION SECONDED by Brian Young
- O MOTION UNANIMOUSLY PASSED

#### **UPDATE ON AUGUST 20, 2014 MCM FORUM – CATHY SPINNEY**

- Notes from the meeting where taken by Kandice Kailer.
- Cathy asked the QC members if they had any questions/comments /discussion relating to the notes.
- Chris Santaniello said she had taken all the comments and put them into her work.
- Cathy Spinney has concerns regarding what is going to be done with comments from the forums. She questions if the ideas/suggestions/problems raised during the forums, will show up in actual contract language or if they will just be reviewed as informational.
- Sarah Aiken said she had been asked that exact question. She had asked Lorene Reagan specifically how information would be conveyed. She was told everything would be complied and sorted into general themes and that information would be shared once completed. That information once complied would be used to create plans. The Department was not going to post minutes from each session, but an aggregate of themes
- Cathy Spinney felt that the notes from the MCM forum seem sanitized, the passion and feelings which were felt within the forum, are not coming across in the notes. There is a level of mistrust in having a hired consultant relay the information, which people were adamant on, to those who will compile?

- Denise Sleeper stated that they have been clear all along that the feedback would be part of the Department's review. That they will look at all of the input from all 26 sessions and the Department will have a clear understanding of where the concerns are. The forums raised many issues which have not risen to the Department level. You can definitely walk away knowing that the information gathered from the sessions will be integrated into the design and once the draft plan is created, you will be able to review.
- Richard Cohen stated that there are four tracks which the QC can pursue. There is the Governor's Commission on Medicaid Care Management. They can make recommendations to the Governor and to Legislation if the Department is not receptive. Yet, even if there is receptivity at the Department and Commissioner level, they still need to present to the Managed Care Organizations (MCO) and there are so many stakeholder that we need to work for all of them.
- William Cohen mentioned that Denise Sleeper spoke on process, Richard Cohen spoke on steps, but he wants us to look globally. William sees the Department working in one environment and the Quality Council (QC) in a different environment. That the QC would like to know the Department will share the concerns about the process and enable issues to be reviewed. That he would like to be assured that critical elements will not be lost along the way in the process.
- Denise Sleeper replied that the long standing reputation of the Bureau should be enough to assure you that the Bureau is advocating for the needs and best interests of the individuals served by developmental services and that the concerns raised in the forums would be addressed in the draft plan.
- Cathy Spinney stated the disconnect does not lay with the Bureau. It is higher up. Concerns are
  due to what is currently happening now, which are issues within Step I are not being fixed and/or
  are ignored.
- Denise Sleeper state that the Department has not publicly addressed issues in a global way yet. The Department has recommended that the responses be part of the presentation regarding unresolved issues within Step I before discussing Step II. QC can request and ask for recommendations in roll out.

#### NCI DATA – DENISE SLEEPER

- The NCI sub-committee (representatives from the QC, the CSNI QI group and the Private Provider Network) will compare latest results and look for changes/red flags and then do an overall summary & come back to QC with recommendations on what needs improvement.
- This will not be a question by question response. This is a 6 person team which is goal orientated. By the November meeting there will be a presentation.

## **RE-APPOINTMENT OF SEATS**

- John Richards was re-appointed to the Brain Injury Association seat.
- Denise Colby was appointed to fill the NH (ABLE) seat previously held by Peter Fleming.
- Kathy Bates, David Ouellette (Carol Stamatakis alternate), Barbara Wilson and Robin Carlson were re-appointed to the Developmental Disability seats.
- QC asked for information on status of Kathy Bates 6-month leave and if they will replace her on the seat or if she will return? Maureen DiTomaso will send email to gather this information.
- Linda Bimbo will fill the Institute on Disability seat previously held by Jonathon Drake.

#### **ELECTIONS**

- John Richards NOMINATED Cathy Spinney to Chair and Robin Carlson to Vice Chair
- Debra McClure SECONDED to re-elect Cathy Spinney and Robin Carlson.
- William Cohen MOVED to vote
- QC UNANIMOUSLY VOTED
- Cathy Spinney and Robin Carlson were re-elected as Chair/Vice Chair

#### SUB-COMMITTEE REPORTS; MANAGED CARE - CHRIS SANTANIELLO

- Preliminary review of the recommendations. Currently report is at 26 pages.
- The August meeting had been postponed due to MCM Forum.
- Intended to provide full council with a draft for consideration, but there remains a number of questions for the sub-committee to streamline and focus on before presenting to the full QC.
- Concerns about timeline. When does it have to be submitted?
- Request this be an agenda item for the November QC meeting.
- Denise Sleeper replied, do not delay. The draft plan is coming out and it is not clear how much information which is coming out in November will be toward the DD population.
- Chris Santaniello asked how can there be a draft plan without the sub-committee input.
- Denise Sleeper stated that the work is being done parallel. The Department cannot wait for all the information to come in. Items are in place and then information that comes in will be integrated into the draft plan. It is not only the QC working; the entire Department is working on this. Lorene had shared this information to the Quality Council when she asked the Quality Council to assist with this process.
- Sarah Aiken asked "Once the forums are complete, the Department will complete a draft of the initial plan and then share that with the greater public so they can comment?"
- Denise Sleeper replied yes.
- Sarah Aiken stated if that is the case, the work we have done could be incorporated as part of the plan, allowing this group the work that needs to be done, while providing the Department with the information needed from us, which is not what we were told or understood. We can still accomplish by using this document as a response.
- John Richards stated that there has been a huge amount of work done. He feels that they should look at this by email and come up with a version we can all feel OK with and get that over to the Department because we want our information incorporated.
- Chris Santaniello stated this is what needs to be included in the contract. The contract cannot be developed until we know what needs to be in the plan. The draft plan can be changed. We may change it to 2 different contracts / system. The November contract will not be done.
- Debra McClure stated that she remembers Lorene Reagan saying exactly what Denise said.
- Richard Cohen stated his recollection, the DD was the main core and we would develop it and somewhere along the way that changed. Recommendation of system issues? Will that come out in the draft plan? Are there are recommendations to address those types of things?
- Chris Santaniello replied, not specifically. Another option would be to have a special QC meeting in October.

#### DOMAINS - PRELIMINARY REVIEW OF RECOMMENDATION - RICHARD COHEN

- Cathy Spinney informed QC that Jonathan had to resign his seat on the QC and he is also no longer the Chair of the Domains sub-committee. Brian Huckins has agreed to help in the interim.
- Cathy Spinney informed QC the location of the meetings is also in limbo.
- Cathy Spinney asked QC members to give some thought and hopes someone will come forward to become Chair of this sub-committee.
- Cathy Spinney stated that during the last meeting in August, it was decided that the job of
  identifying the domains, creating measures and outcomes would be beyond the ability of the subcommittee. It was suggested to hire on outside entity. Richard Cohen has written a letter asking
  for very specific support.
- Richard Cohen stated that the letter is addressing 2 issues. QC made recommendations in October to the Department to monitor the MCO's in order to see if they complied with the contract in Step I. But yet the Department contracted that out to a private entity.
- Richard Cohen explained what was proposed in October was that the indicators would stay within the Department but that a different unit would be developed. That entity would be staffed and have its own governing body and they in turn could contract with outside agencies. They would develop indicators and collect data from the MCO's to make sure they were doing what they are supposed to be doing. This recommendation was made to the governing board, yet they never heard back from the Department. Had that recommendation been started back then and was up and running, they could have been doing the quality indicator pieces.
- Richard Cohen stated the letter he has drafted will ask the Department to take a lead role to set up the new unit, but also in the meantime contract with one of the organizations while this Quality Assurance Agency is being created. Six volunteers cannot complete the work of developing the indicators. It should be the Departments decision as to what those indicators are.
- Denise Sleeper stated some of that information is not accurate. The Department is required by CMS to work with an outside agency to evaluate the care management program. It is called an External Quality Review Organization (EQRO). The Department has a unit that is working with the EQRO around Step 1 and is currently working with the program areas to begin developing a quality strategy for Step II. What you are asking for would be a duplication of work that the Department is already doing as a requirement of the contract from Step I. Doris Lotz is working for the Department and all Bureaus. I can request that she speak to the QC to explain her role. This might be a better place to start. The Department is already doing what you are asking for in this drafted letter.
- Richard Cohen stated that what Denise just stated was not what was requested in the letter. Questioned if the Department had the resources to do this. Is the same level of expertise available with the Department? Long term care is more complex. He'd be surprised if the Department had the expertise and time to create the indictors and what should the domains be? The Department should get outside help. It's still valid if you get help from 3-4 organizations.
- Denise Sleeper stated that the Department is looking to the Bureau, the input from stake holder meetings, and information from the national research to help develop the strategy. When you are honing in on quality how do you measure it? It is not concrete. Denise feels that this is in development and Doris is not doing it independently.
- Richard Cohen stated that he still wants to send the letter and let the commissioner respond.
- Brian Huckins mentioned that in Step I the Department contracted with private agencies.

- Chris Santaniello stated that she thinks the QI is coming in November to discuss current indicators. It would be helpful to be informed. This letter seems to come out of nowhere. She understands the Department did not respond, but she would suggest asking for an update. Have Doris come and speak to the QC. Then after QC would have a better sense to make a recommendation. If we send this letter, we may not get a response again.
- Richard Cohen stated he is concerned about delaying. What if QC doesn't get the information in November, or if we get the information and end up at the same point? With Step II on the horizon, maybe they would not have time to contract out.
- Debra McClure asked Richard Cohen if he could amend the letter and ask them to come.
- Richard Cohen stated that would be an alternative. State that we did not receive a response and we would like an update to learn more.
- Robin Carlson stated she would be interest to find out what NCI has already found.
- William Cohen stated that he wonders if it would make more sense to have Doris come to the next Domains committee (although it is not scheduled yet). To him it sounds like things could have been done in parallel and that they already exist.
- Denise Sleeper mentioned that she discussed back in the October 2013 that performance measures for Step II needed to be created. At the end of the day it comes down to contract expectation and what gets measured. We want good measurement for expectations from Step II. We invite as much involvement. Having Doris come would help with the world of measurement. It will give QC a sense of how the Department works with the unit and what the process is regarding how things are monitored.
- Chris Santaniello asked if there had been a new quality unit created at the Department.
- Denise Sleeper replied no, they became more prominent when the Department went into contract the MCOs.
- Chris Santaniello stated that it would be redundant to ask about our recommendations before hearing from Doris.
- Richard Cohen asked if it is the Departments intent to contract with EQRO during Step II.
- Denise Sleeper replied yes. It is a requirement from CMS.
- Richard Cohen stated that November could be too late, but that he likes the idea of Doris coming to Domains or if the QC has an October meeting.
- Cathy Spinney asked QC members if there was a willingness to have an October meeting. That they could review the subcommittee's work and invite Doris Lotz.
- MOTION to have an special QC meeting in October made by John Richard MOTION
- MOTION SECONDED by William Cohen
- MOTION UNANIMOUSLY PASSED
- Cathy Spinney stated all in agreement that a special QC meeting would be held on October 15, 2014
- MOTION to table letter made by Richard Cohen
- MOTION SECONDED by Brian Young
- MOTION UNANIMOUSLY PASSED

#### TRANSPARENCY - WILLIAM COHEN

- The subcommittee's second meeting was held in September and detailed notes have been uploaded to eStudio for members of QC to review.
- They had a chance to look over information and narrowed down concerns with how to get information to families of teenagers 21 years old and/or older parents taking care of adult children. These families do not know who to talk to or what to do.
- Concerned that things are done differently from one Area Agency to the next. When Area Agencies were set up, it allowed cultures of the different areas of the state to dictate what happens. Wishes there was more uniform procedures across the state.
- Subcommittee would like pamphlets from all Area Agencies and then the subcommittee will review the mission statements and strategic plans (work plans) of all agencies.
- Laurie Giguere stated that at the state meeting next month the Support Council meeting (first Monday in October) they will gather those for the subcommittee.

#### WORKFORCE TRAINING - RICHARD COHEN

- Richard Cohen has another letter to discuss with the QC. When the DRC/White paper subcommittee came out in 2011, they found a number of issues after looking at the findings of previous reports, there are problems in serving folks with IDD & behavioral and/or medical issues. The subcommittee made recommendations. The commissioner wanted the QC to review the recommendations and come up with correction steps and proposals. Richard Cohen chaired a committee and worked for 18 months to come up with recommendations to change the He-M regs.
- There are still a whole number of recommendations which need to be worked on. They have received limit responses from the Department. The subcommittee is seeking a formal response from the Department. Would like to know if they are formally working on the recommendations, update the subcommittee on where the Department stands on those recommendations along with what is happening currently and what the Department is doing independently. The subcommittee needs this information because they do not want to duplicate work.
- Chris Santaniello stated that there is a lot of information on this letter and she is concerned the message in the letter could be lost or not responded too. Chris recommends a conversation may be better and suggested that QC invite the commissioner to attend of QC meeting and then pick 1 or 2 of the recommendations to discuss and move forward on.
- Denise Sleeper stated that she is concerned that the bureau has been bypassed. There are items within this letter that she can answer. To send this letter or jump to the commissioner oversteps the bureau. There are things on this letter which have been worked on and shared with the QC.
- Cathy Spinney asked if the letter should be re-addressed to Lorene Reagan instead.
- Richard Cohen stated that his concern is that they have put a lot of work in to the recommendations and that they feel they should have a response in writing. Discussions can be interpreted differently. Need something more formal and concrete. The Bureau may have one view and the commissioner a different one.

- Jennifer Pineo stated there seems to be a communication issue between the Department and the QC. Feels like we are going in circles. Feels QC responsibility to state that the QC has not received a response to our first request for information.
- Cathy Spinney stated that the QC is a body created by the legislature. If we ask for something in writing, we should expect a response. The fact that we do not get responses is inexcusable. We must have some power, QC is a collaborative entity. There is not as much on record as should be. Maybe we should readdress the letter to Lorene Reagan and cc the others. Give the Bureau a chance to answer.
- John Richards suggested we put a timeframe on the letter.
- Denise Sleeper stated if there was communication to the Bureau, we respond. There has been a lot of work done by Area Agencies, the Bureau and QC. It's a matter of how can we demonstrate how much work has been done.
- Cathy Spinney stated it is an official document issue.
- Jennifer Pineo stated QC needs to be on record.
- Cathy Spinney agrees that QC needs a better paper trail.
- Cathy Spinney asked if QC should readdress letter to Lorene and give a deadline for the October meeting and then have more discussions.
- Brian Young stated we are in a collaborative state when we are around this table. We go to the line and then we table it. Afraid that we are going down that path again. We are not getting answers and we should be heard, QC was appointed by the governor.
- Richard Cohen is concerned that all recommendations are important, if we decide to pick out a couple to discuss it could take a long time to get through. The vast majority of the recommendations are important.
- Cathy Spinney stated that Denise Sleeper has information she would like to give us first officially in writing. We'll get an update on the spreadsheet from Denise and then the subcommittee can look at it. Then after can determine if the letter needs to go out.
- Denise Sleeper mentioned that she would like the QC to adopt a practice to go to the Bureau first with formal requests. Then go to the Commissioner and then Governor. Cautions QC to sending the commissioner too many letters.
- MOTIONED to readdress letter to Lorene and cc the commission and add a timeframe made by John Richards.
- MOTION SECONDED by Brian Young
- MOTION UNANIMOUSLY PASSED

# REVIEW GOALS FROM OCTOBER 2013 ANNUAL MEETING - CATHY SPINNEY

- Cathy Spinney stated there was a recommendation when QC completed the annual report that we include any recommendation the QC has made and to whom.
- Cathy Spinney stated there should be a summary of the membership and hours attended to officially acknowledge the work done.
- Cathy Spinney referred to the recommendation that a workforce have an independent board develop DSP trainings.
- Chris Santaniello stated maybe there could be a collaborative between PPN, Area Agencies and bring people together to focus on workforce and training but frame it differently.
- Richard Cohen mentioned that this recommendation is almost a year old.

- Cathy Spinney noted that this is something which remains on the QC radar.
- Cathy Spinney referred QC to the rule recommendations and questioned if QC worked on them and if any are completed, in process, to be done, tabled?
  - o Update on that will be put in a Word document and posted to eStudio.
- Cathy Spinney referred to question that Sarah Aiken asked if there could be some point Rules 101 training and Richard said yes. Does QC still think that would be helpful?
- Richard Cohen stated he was going to do it in January; it can be a 10-15 minute training.
- Sarah Aiken replied that she has a presentation already and will share it with Richard Cohen.
- Cathy Spinney asked that this be put on the January QC meeting as an agenda item.
- Cathy Spinney notes that QC was officially asked by Nancy Rollins to be a reviewing entity of the product that comes out of SIMS. Is there a product for QC to review?
- Lorene Reagan replied there was a SIM report issued and posted so it is public.
- Denise Sleeper noted that Richard Cohen and 1 or 2 other names were given to Nancy. They were included on the distribution list. The review happened prior to the submissions to CMS.
- Chris Santaniello mentioned that the SIM part was done. The information taken from that will be used to guide Step II. There was a new SIM plan which came out of Step I. There is a new SIM process and new grant was submitted. It now focuses on acute care and language talks about integration.
- Cathy Spinney asked so is this now a moot point for the QC?
- Richard Cohen stated he did go and when the draft proposal came out had made a number of comments, which to his knowledge were not incorporated and the report came out in January.
- Chris Santaniello stated that when she read the new grant proposal, the original SIM stakeholders will be in place.

#### REVIEW SNAPSHOT OF ADDITIONAL INFORMATION FOR THE WAITLIST – LORENE REAGAN

- Cathy Spinney asked Lorene Reagan what has changed in getting these numbers and why Lorene feels these are more accurate.
- Lorene Reagan stated that the Bureau maintains two different wait lists.
  - o Projected services list. This projects ahead 4-5 years. As of this week Bureau had to give the numbers to the finance unit because they are planning the next biennium. This projection includes all people up to 4 years before they are going to need services.
  - Wait List is for those people waiting for services now within this fiscal year. This data was shared a couple months ago.
- Bureau has requirement to report data to the legislature regarding the Waitlist Oversight
  Committee every quarter. Meeting was held in August and then Bureau was asked to meet again
  in September.
- Data points for information that QC received was as of March 2014. At that time Bureau reported:
  - Total of 69 people waiting for DD services with average number of days waiting being 112.
  - Total of 18 people waiting for ABD services and average number of days waiting being 134.
- The Bureau is committed to serving 654 people in this biennium. For fiscal year 14/15 the Bureau requested 26 million in funding to serve those 654 people. Received 24 million, but Bureau committed to still service all 654 people.
  - o Issues which can arise, additional people can come up needing services, people's needs can change. The number of people needing services will always be changing.

- Chris Santaniello noted that a person can get funding and then the family may not want services to start yet, would those people remain on the wait list?
- Lorene Reagan replied that they can get partial funding but yes, they remain on the waitlist.
- Sarah Aiken asked if the Bureau requested 26 million, but only received 24 million, why did Bureau report full funding.
- Lorene Reagan replied that the Bureau agreed to find the money elsewhere within their budget.
- William Cohen asked about the number of new people vs service enhancements.
- Lorene Reagan replied about half the people on the waitlist are people who need new services, the other half are enhancements to current services. So not everyone on the waitlist has no services.
- Cathy Spinney asked then why is that not reported?
- Lorene Reagan replied when Bureau reports to legislature, this is known. There are different categories. As of March 31, 2014 about 54% on the list where already receiving services. About 47% were not receiving services. There are also always a number of people moving onto the list who have never accessed services before.
- Richard Cohen commented that the law talks about people coming on after the age of 21 or out of nowhere, to receive funding within 90 days. Part of the law said if there are amendments to the service plan for something significant, they also have a right to funding within 90 days. Of those 54% receiving some services, what is included in that stop gap or significant?
- Lorene Reagan replied that it would include stop gaps.
- Richard Cohen stated so only people new to the system would be part of the 47% not receiving services when they came onto the waitlist in March? This is important information.
- John Richards questioned where the numbers have gone since March.
- Lorene Reagan stated that the numbers were pulled for June and there was not a significant difference. People were added per region at the end of the fiscal year. Hoping in September a change will be noticeable.
- Lorene Reagan discussed people on the DD/ABD wait list.
  - o At the end of June the average number of days on DD wait list was 111.
  - o At the end of June the average number of days on the ABD wait list was 130
- Lorene Reagan discussed that Bureau cannot control the number of people on the waitlist, but that they can change the number of days waiting.
  - Area Agencies need to serve those people first and then take off the wait list when funding is available.
  - o The Bureau has worked with Agencies to clean up the data they are giving us.
- Cathy Spinney asked why the Bureau does not look over the last three budgets, see determine the number of people that needed to be served and then determine the number of people who come up as new additions not factored into the budget and then determine an average number and build that average number into the projected budget?
- Lorene Reagan stated that the Bureau's tries not to change the methodology of the way data is collected. This could cause mistrust in future discussions with legislature. Bureau's mandate is to ask for what the Bureau knows we will need. There has not been discussions regarding asking for more funding. Bureau has gained trust from the legislature by following this approach.
- Cathy Spinney stated then the requirement of the law can never be met in theory. If you do not ask for funds in budget, compliance with the law cannot be achieved.
- Lorene Reagan stated that the Bureau will meet the 654 target. The Bureau does need to get a better handle on enhancements. When funding is received they need to come off the list. But they might not be able to access services. Bureau is micro managing the wait list as we move forward. Bureau feels they can address needs in other ways besides adding to the wait list funding request. Bureau is working with Liaison's and Area Agencies to look at whose waiting and what can be done with late start funding.

- Cathy Spinney agrees this is a valid strategy as long as it is not used to fudge numbers. Suggested the methodology defined by the Department needs to be changed.
- Chris Santaniello stated it is hard to anticipate now as to what the needs will be in fiscal year
   16/17
- William Cohen stated that when working with legislature, Bureau is following sound business practice.
- Brian Huckins asked with MCO's coming down the road, will they have the leniency to go beyond the 90 days if we do not enforce the law?
- Sarah Aiken because public has trust and history with the Area Agencies and the Department, we allow for things that we may not allow the MCO.
- Richard Cohen stated that people are waiting up to a year. The law has only been on the books for six years. But for the last six years there have been wait lists. Feels the Bureau should be honest with the legislature because the law is being violated. Richard stated that he feels the Bureau should make the request to legislature for projected additional funds.

#### PUBLIC COMMENT

• Jennifer Vezina from Region 5 stated to Richard Cohen that Region 5 had implemented the START process and her son had gone through the program and that the Direct Support Staff has had training every year.

MOTION to end meeting made by Brian Young MOTION SECONDED by Debra McClure MOTION UNANIMOUSLY PASSED

Next Meeting (tentatively): Wednesday, October 15, 2014 from 10:00AM – 12:00PM NH ATECH, 57 Regional Drive, Suite #?

The Developmental Services Quality Council provides leadership for consistent, systemic review and improvement of the developmental disability and acquired brain disorder services provided within New Hampshire's developmental services system.

# **DEVELOPMENTAL SERVICES QUALITY COUNCIL**

#### **MINUTES**

Wednesday, October 15, 2014

# Attending Members:

Laurie Giguere, Family Support Council
Chris Santianello, Community Support Network Inc.
Debra McClure, Family Support Council
Brian Young, Private Provider Network
Barbara Wilson, Direct Support Professional
Robin Carlson, Enhanced Family Care Provider
Cathy Spinney, Area Agency Board–Region X
John Richards, Brain Injury Association of NH
Maureen Fitzhenry, Family Support Council
Brian Huckins, Autism Society of NH
Dick Cohen, Disabilities Rights Center
Jennifer Pineo, Area Agency Board – Region I
Amber Parshley, People First NH
Denise Sleeper, Bureau of Developmental Services

## Absent Member(s):

Kathy Bates, NH Council on Developmental Disabilities Jonathon Drake, Institute on Disability Peter Fleming, ABLE Bill Cohen, Area Agency Board – Region IV David Ouellette, NH Council on Developmental Disabilities

#### Other Attendees:

Sarah Aiken, Community Support Network Inc.
Patrick McGowan, Office of Medicaid & Business Policy
Chris Rueggeberg, NH Council on Developmental Disabilities

#### I. Welcome

The meeting was called to order by Cathy Spinney, Chairperson, at 10:00am.

#### II. Letters

A letter was sent to Lorene Reagan with a cc to the Commissioner based on a vote taken at the August meeting. A chart outlining issues was included with a column for updates. It should be updated by the end of October.

A letter was sent to Commissioner Toumpas requesting a delay in submitting the Quality Council's recommendations on the draft design for the three Waivers (DD/ABD/IHS). It is anticipated that the recommendations will be voted on at the January 21<sup>st</sup> meeting and forwarded shortly thereafter. It is unclear whether the Council will present the recommendations to BDS/DHHS to forward to the Governor's Commission or directly to the Commission.

Denise will share this with DHHS and encouraged the QC to submit sooner than later.

# III. Joint HHS Oversight Committee

Cathy Spinney had a preliminary meeting with two members of the Joint HHS Oversight Committee on September 30th and was invited to present to the full Committee on the Quality Council's position on commercial managed care on November 14th. Cathy let them know that she would need to check with the full Council before scheduling. The presentation would include how the current DD delivery system works and the potential impact under the commercial model.

While the Council agreed to the presentation, it was agreed that we would not share the draft document or executive summary as they have not yet been made public. It was noted that this presentation to the Oversight Committee will be made prior to the elections and creates an educational opportunity to revisit and update legislators at a later date. It was suggested that Cathy use the PowerPoint presentation from the August meeting as the basis for her presentation. She will share the presentation and handouts with the Quality Council prior to the presentation.

Chris S. will get sourced date to Cathy Spinney regarding dollar amount of what the state current gets for free services vs. what MCO may have to pay for.

# IV. MCO Recommendations – Review and Discussion

#### General comments:

- Process: managed care subcommittee took 6 months and worked hard to include all
  perspectives and some points may be contradictory know we may need to
  compromise.
- Documentation reflects the Managed Care subcommittee's recommendations; it will still
  need to be voted on. Purpose of document is to give the Department recommendations
  to consider as they enter into contract. What Managed Care subcommittee says needs to
  happen for the new system and contracts.
- 2 sections (10 & 11) need to be reviewed specifically, which we will not get to today.
- Document is quite lengthy (26 pages) but reflects all needs, hard to determine what is included and not included
- Denise Sleeper is abstaining from discussion as representative of BDS not from a position of agree/disagree
- Need to define LTSS services.
- Reminder: QC guidelines the full QC will support the majority vote
- Want this sentence added somewhere in the document. "We would like to support people who experience disabilities to be treated with dignity and respect and to be supported to live the best possible quality of life that they can."
- Need to include everything we want, even if we don't get it all
- Need to include all components that ensure service excellence and enforcement mechanisms for MCOs
- Overwhelming document, MCOs would leave, however, we need to make recommendations to address AA system – better for us to work within system than MCOs
- Chris S. wanted to go on record that she did try to edit the document, but items removed were added back in.
- Need to focus on how to operationalize the business model with MCOs that provides a system that works for us
- Important that we include laws/regulations required to support good services if MCOs can't provide services financially they will leave
- Requested format of the document be changed so that it is easier to read.
- Entire document may not be presented, need to decide what to present and to whom
- Reviewed sections 1, 2, and identified where QC members have questions/concerns.
- Send comments using track changes to Chris by 10/31/14 and vote at November meeting

#### V. Domains (Patrick McGowan, Administrator, NH DHHS/OMBP)

- Shared PPT handout
- Reviewed current and future organizational structure
- Medicaid Quality Program covers
  - o preventative, acute
  - o chronic health care and population health
  - o member and provider experience
  - o business and operational performance
- Quality: information (analysis) -> Assurance (action) -> Improvement (action)
- Range of data field collected (can't measure what you don't collect)
  - o Providers will still need to submit claims (to MCO)
- Medicaid Quality Program takes data, analyzes and develops reports for comparison (i.e. Medicaid Care Management Key Indicators Report – available publicly)
  - O Acute data does not identify people with DD then how can we make decisions about changes? (what % of individuals with DD are denied services?)
  - Have begun discussions with BDS re: how to change data collection to best inform
  - Would it be helpful to send list of data points to BDS/MQP to inform data collection? Yes we will do after January.
  - Consider CSNI Quality Committee recommendations. Meeting with the QC soon
- NH Medicaid Quality Website coming soon
- Medicaid Quality Program Action
  - Confirm findings are we collecting the right data? Identify trends (+/-) and make changes where needed.
  - o Assurance share data and response
  - Improvement response to situations
- External Quality Review Organization (EQRO)
  - o Health Service Advisory Group (HSAG)
    - Operating in many other states
    - Reviews MCOs
      - Validate data
      - Conduct focus groups
      - Identify issues
    - Negotiate correction plans
  - o Federally required
  - Objective 3<sup>rd</sup> party organization

- Info from EQRO:
  - o Are EQRO documents publically available?
  - Not report but summary of info via DHHS
  - Will be conducting activities for Step 2
- Next steps
  - o Expand managed care QA activities
  - o Build capacity
  - Further validate data
  - Apply QA and improvement to DHHS Medicaid activities
- Step 2 Quality Design
  - o Step 1 Managed care reporting drill down to Step 2 populations
  - Inventory of existing reporting needs for LTSS
  - Inventory of reporting needs (public and private)
- Questions
  - Looking at combining activities for Step 1 and 2 similar activities
  - Will conduct customer satisfaction surveys and other measures (National Core Indicators, etc.)
    - Concerns about doing multiple surveys

Question: based on this presentation, does this mean that the Domain subcommittee is not needed? Are we doing parallel work? What is the charge of the Domain Subcommittee? (Currently no chair and no meetings scheduled)

Discussion: Medicaid Quality Program is not creating measures. Welcome feedback from stakeholders in partnership. Domain subcommittee recommended that DHHS retain a consultant (HSRI, CQL) to assist NH in developing long term indicators across domains. We would like to hear from QI people in each region about identified domains/data points – then share with BDS/MQP.

Could group takes on task of reviewing what measures exist (CSNI QI group, NCI data points, AA QI representatives, etc.), summarize for QC to assess gaps and recommend way to address gaps? BDS is also working on process to do this and would welcome input and/or feedback.

#### VI. New Business

- a. Lakeview Dick Cohen
  - DRC issued reports a couple of weeks ago regarding poor care at facility in NH and death of individual. Reports on DRC website
  - More than half of residents are from other states they are being contacted by DHHS
  - DHHS/BDS and Governor have been very responsive
  - Transition plans are being developed
- VII. <u>Employment Leadership Committee</u> completed report and will be posted to eStudio
- VIII. <u>Public Comment</u> None notes
- IX. Misc
  - Dick Cohen noted invitation to Open House.
  - Care Management and Employment has been submitted. Will be posted to eStudio.

Motion to adjourn was seconded. Meeting adjourned at 12:18pm.

Action Items from this Quality Council Meeting:

• Send comments using track changes on the MCO Recommendation document to Chris Santianello by 10/31/14

Agenda Items for the Next Quality Council Meeting:

- Vote on MCO Recommendations during November meeting.
- Follow Up on the letter which was sent to Commissioner Toumpas requesting a delay in submitting the Quality Council's recommendations on the draft design for the three Waivers (DD/ABD/IHS)

The Developmental Services Quality Council provides leadership for consistent, systemic Review and improvement of the developmental disability and acquired brain disorder Services provided within New Hampshire's developmental services system.

# DEVELOPMENTAL SERVICES QUALITY COUNCIL MINUTES NOVEMBER 19, 2014 MEETING

# **ATTENDING MEMBERS:**

Amber Parshley, People First NH
Barbara Wilson, Direct Support Professional
Bill Cohen, Area Agency Board – Region IV
Brian Young, Private Provider Network
Cathy Spinney, Area Agency Board–Region X
Chris Santianello, Community Support Network Inc.
Debra McClure, Family Support Council
Denise Colby, NH ABLE
Dick Cohen, Disabilities Rights Center
Jennifer Pineo, Area Agency Board – Region I
John Richards, Brain Injury Association of NH
Linda Bimbo, Institute on Disability
Rebecca Whitley, NH Council on Developmental Disabilities
Robin Carlson, Enhanced Family Care Provider
Sarah Aiken, Community Support Network Inc.

# VIA PHONE:

Laurie Giguere, Family Support Council

## **ABSENT MEMBER(S):**

Brian Huckins, Autism Society of NH David Ouellette, NH Council on Developmental Disabilities Denise Sleeper, Bureau of Developmental Services Kathy Bates, NH Council on Developmental Disabilities Maureen Fitzhenry, Family Support Council Peter Fleming, ABLE

#### **FACILITATOR:**

Cathy Spinney

#### **SEPTEMBER MINUTES**

John Richards motioned to approve, Brian Young seconded the motion and Motion unanimously passed.

# **OCTOBER MINUTES**

Dick Cohen motioned to approve, Brian Young seconded the motion and Motion unanimously passed.

# DRAFT QUALITY COUNCIL ANNUAL REPORT

Brian Young motioned to accept, Debra McClure seconded the motion and Motion unanimously passed.

• The Quality Council Annual Report is now ready for public distribution

# REVIEW AND DISCUSSION OF COMMENTS ADDED TO THE LATEST DRAFT OF THE STEP 2 RECOMMENDATIONS

Chris Santianello has identified and narrowed only the specific areas where there has been differing opinions on a point or real need for clarification.

QC will only focus on those specific points identified by Chris Santianello. QC will not be voting on a final document today. After this meeting and discussion, Chris Santianello will again make the changes and QC will get a final version prior to the January meeting.

QC will formally vote on in January we will formally vote on the document and be ready to present to Department and Bureau, possibly Governor's Commission.

QC will discuss other entities, where they should be presented and how those presentations will take place and then conversely when they will be. Therefore all members of the QC will be aware and can attend those presentations for support.

- Chris Santianello discussed formatting changes she had made to the document.
  - > QC agreed these changes made document easier to read and follow.
- Include broader LTSS, beyond DD/ABD in sections 10 & 11?
  - > QC agreed to leave wording where it is and add an introductory paragraph.
- Payment to family caregivers when someone is over age 18
  - ➤ QC agreed to end current sentence after phase age 18 and then add bullets about rigorous safeguards / oversight (Dick Cohen will send language to Chris Santianello)
- Executive Summary
  - ➤ QC agreed on the summary. Include where QC got the data in the language.

- Which attachments do we include in the document?
  - A) Client Rights, Appeals and Grievances
    - > QC agreed we do not need this attachment, it is in the body of the document
  - B) White Paper Committee, Salary and Benefits Recommendations
    - > QC agreed to keep this attachment.
  - C) Workforce Committee, approved by Quality Council on May 13, 2013
    - > QC agreed to keep this attachment.
  - D) Considerations for Employment Services in Care Management
    - > QC agreed to keep this attachment.
  - E) Quality Council report on Quality Indicators for Employment, July 12, 2011
    - ★ Dick Cohen will inform Chris Santianello which items have been adopted by BDS.
    - > QC agreed to keep this attachment.
  - F) Quality Outcomes for MCO's
    - > QC agreed to keep this attachment.
  - G) Contractual Services Terms and Conditions
    - ➤ QC agreed to take out this attachment, but include footnotes to reference other documents (Hawaii, Michigan, North Carolina etc.)

## ADDITIONAL DISCUSSIONS ON RECOMMENDED ADDITIONS/CHANGES

Dick Cohen discussed questions and concerns he has with the bullet "The inclusion of details on how care coordination services will not be disrupted for the individual/family if conflict-free case management is implemented. If one entity performs one of the key functions and also provides a direct service, a conflict of interest can potentially arise so appropriate firewalls and guidelines shall be developed by DHHS and adopted by the MCO's and the Area Agencies/Private Providers, so that one entity can continue to provide both.

- Do the present QC members endorse the concept of conflict free case management?
  - > QC could not agree on vote because definition of conflict free case management is too vague.
  - ➤ CMS defines conflict free case management as "clinical or non-financial eligibility determination separate from direct service provisions"
- Does the QC leave this bullet worded as it is?
  - ➤ Chair asked Dick Cohen to finish up writing what the changes are he would like to the bullet and that the QC will come back to this topic when he has it ready to present.

Recommended changes to the wording of the last bullet under HCBC Benefit Packages/ Required Services, "The MCO's maintains START house(s), preventative services and additional supports in time of stress.

★ Linda Bimbo will send the recommended change in wording to Chris Santianello

Could wording be added somewhere to Section 18 Financing regarding concerns around payments so that families can pay their providers timely.

- Suggest QC review the payment provision and add wording that if entity or organization under 10 staff that they payment has to come every 15 days.
  - ★ Sara Aiken will pull together existing language and suggested modified wording and give to Chris Santianello. Chris will then add it under DHHS requirements section.

Dick Cohen made a motion to add this language instead of what is already in document. DHHS shall require conflict free case management (defined as the case manager coming from an entity separate from the service provider or the MCO's, however, recognizing that this may not be possible in all regions, e.g. North County, or members may want to retain current case managers, exceptions may be made with necessary firewalls and rules to protect against conflict of interest.

- Sara Aiken recommends getting a better definition of conflict free case management for next QC meeting.
- Jennifer Pineo suggest tabling the motion so that at the next QC meeting the definition of conflict free case management can be better understood by all members of the QC.
- Cathy Spinney suggest leaving the wording as is, but add two bullets "DHHS shall not allow or contract with the MCO's to provide any case management". "DHHS shall engage the NH DD/ABD council to define conflict free case management in New Hampshire for DD/ABD and for recommendations on best on how to implement."
  - ➤ QC reached consensus that the wording remain the same but the additional 2 bullets be added.

Dick Cohen opened discussion to change wording on section II "The contract between the State of NH and the MCO's, shall require, at a minimum" bullets "Retention of the Ten regional Area Agencies and the Private Provider system as it is currently structured; no forced closures or consolidations." and "Retention of the direct decision-making authority in the governance of the Area Agencies and retention of full control of funding for Developmental Disability/Acquired Brain Disorder (DD/ABD) LTSS by the system users"

- Dick suggested this revision "Retention of a regional Area Agency and provider system of delivering services (in accordance with RSA 171A generally and 171A:18 specially) and the Private Provider system as it is currently structured; no forced closures or consolidations
  - ★ Quality Council members should email Chris new wording suggestions for these bullets and Chris will summarize send out for an email vote for the Quality Council members.

Dick Cohen opened discussion about rewording Section 6 Self-Direction, bullet "In this model, the MCO's shall not dictate education or other requirements for employment of Direct Support Staff"

- Dick suggested adding this wording to the bullet "but shall encourage members and families to
  utilize persons appropriately trained or certified and reflect higher compensation to such staff in
  the individual's budget."
  - ➤ QC agreed to add this wording to the end of the bullet "but shall encourage members and families to utilize persons appropriately trained or certified."

Dick Cohen opened discussion about Section 18 Financing. Addition of a bullet "rates shall be sufficient to enable providers and members/families to attract and retain highly qualified staff in all positions see e.g. appendix B for the Quality Council's proposal for direct support staff.

> QC agreed to this addition

Chris Santianello asked that all revisions and wording suggestions be sent to her by Friday, November 21, 2014 so that she can make the revisions to the document and have a final version available to all QC members prior to the January meeting that the final vote on the document can take place.

Chris Santianello asked Cathy Spinney to reach out to the Commissioner and Lorene Reagan. To inform them that the QC will be voting on document on January 21<sup>st</sup>, 2015 and then ask them when they can meet for the presentation of the document.

# **SUB-COMMITTEE REPORTS**

- Managed Care
  - No updates
- Domains
  - Needs new Chair
- Transparency
  - Per William Cohen, had a very small group meeting, going over some of the things we talked about last time, we need more homogeneous presentation for families across the state that people are looking for, there are many similarities and there needs to be a standard practice.
- Workforce Training
  - Per Dick Cohen, regarding the White Paper recommendations. Last week got a response from BDS last week. They will vet and come up with response or report to present to the QC in March.

# **OTHER/ANNOUNCEMENTS**

- Committee working with CSINI on analysis may be ready in January to present report.
- Rule updates
  - 503 BDS will be seeking an extension to continue working on the 503. QC recommendations are being considered and will be integrated wherever possible
  - 521 the QC proposed changes stakeholders and Fire Marshalls have been incorporated into the 521 Reg and is in the queue waiting to move through the process
  - 524 not worked on yet, but will incorporate the same changes as 521
  - 530 is not moving forward, that was for Supported Independent Living and currently those services are provided under 507.
    - ★ Cathy will email Denise for clarification if Supported Independent Living services are under the 507 or 517.

## LEGISLATION REPORT

Sarah Aiken discussed election results. The House will be made up of approximately 160 Democrats and 240 Republicans. No one will have majority.

House Speaker nominee's Republican = William O'Brien Democrats = Steve Shirtless. Full house will get together Dec  $3^{rd}$ , 2014 to vote.

Senate made up of 10 Democrats and 14 Republicans. Senate president remain Chuck Morse, Minority Leader will be Jeff Woodburn from North County. House and Senate are in the process of determining who their committee chairs and vice chairs.

Suggest you can look at the New Hampshire General Court website for additional information on current legislative service requests.

Sarah is always available to answer questions.

# **PUBLIC COMMENT**

None

Jennifer Pineo motioned to adjourn, Sara Aiken seconded the motion and Motion unanimously passed.

# **Action Items from the Meeting:**

- ★ Dick Cohen will inform Chris Santianello which items have been adopted by BDS.
- ★ Linda Bimbo will send the recommended change in wording to Chris Santianello
- ★ Sara Aiken will pull together existing language and suggested modified wording and give to Chris Santianello. Chris will then add it under DHHS requirements section.
- ★ Quality Council members should email Chris new wording suggestions for these bullets and Chris will summarize send out for an email vote for the Quality Council members.
- ★ Cathy will email Denise for clarification if Supported Independent Living services are under the 507 or 517.

# Agenda Items for the next QC meeting